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ABSTRACT

Results of the 1981-1982 Rutland Center project in Athens, Georgia, which assists agencies in improving services to seriously emotionally disturbed children (2 to 8 years old), are presented, as are program materials, survey forms, and a newsletter. Outcome data are presented regarding therapeutic classroom services provided to 549 severely emotionally disturbed/mixed handicapped preschool chidren and their parents and teachers at 12 replication sites outside Georgia. Outcome data are also given regarding planning and other technical assistance activities, training workshops, inservice training, program evaluation, information dissemination and demonstration activities; and evidence of parent participation effectiveness and child progress by replication site. Components of the Rutland Center Developmental Therapy Model utilized by each replication site are also covered. Appendices include: a "Developmental Therapy Newsletter" issue, "Developmental Therapy Rating Inventory of Teacher Skills," and "Developmental Therapy Administrative Checklist." (SEW)

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1981-82 ANNUAL REPORT

RUTLAND CENTER DEVELOPMENTAL THERAPY OUTREACH PROJECT

G008101170

Outreach Assistance for Utilization
of the
Rutland Center-Developmental Therapy Model

UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF SPECIAL EDUCATION

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1981-1982 Annual Report
Rutland Center Outreach Project
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Forward

This is the 1981-1982 Annual Report for an OUTREACH PROJECT. The suggested format for HCEEP Annual Reports is followed as closely as possible, particularly with respect to the required data tables and appendices. ONLY RESULTS OF OUTREACH ACTIVITIES IMPLEMENTED BETWEEN JULY 1, 1981 AND JUNE 30, 1982 ARE INCLUDED IN THIS REPORT.

As in the preceding years this OUTREACH PROJECT again focussed on providing outreach services to targets outside Georgia for the stimulation of increased services and upgrading quality of services offered to seriously emotionally disturbed preschool children (ages 2 to 8 years). The Georgia Psychoeducational Center Network, which is itself an in-depth replication of the Rutland Center Developmental Therapy Model initiated in the third year of the BEH-HCEEP Demonstration Grant, continued to operate. Data about this Network are not included because the Outreach Project's major responsibility is to programs outside the state of Georgia.

The following statements should be considered when reviewing this report:

- Whenever the term "Model" is used it refers to the Rutland Center Developmental Therapy Model.

- The Rutland Center in Athens, Georgia is the "Demonstration (Continuation) Site" for utilizing the Model with seriously emotionally disturbed preschool children.

- A program which utilizes the Model to serve preschool handicapped children and their parents and received technical assistance for such efforts is said to be a "Model Utilization Site."

- A program which plans to utilize the Model in 1982-1983 to serve preschool handicapped children and their parents and received program planning and design assistance during 1981-1982 is said to be a "Model Utilization Site In Planning."

- A site which has utilized the Model to serve preschool handicapped children without receiving assistance is said to be "Site Reporting Utilization of the Model and Not Receiving Outreach Assistance."

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PART I

PRELIMINARIES

1981-1982 Annual Report
Rutland Center Outreach Project
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UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION

Program Performance Report
for
Handicapped Children's Early Education Program

Part I

1. Date of Report: September 24, 1982 2. Grant Number: G008101170

3. Period of Report: From July 1, 1981 To June 30, 1982

4. Grantee Name and Descriptive Name of Project:

Karen R. Davis: Outreach Assistance for Utilization of the Rutland Center-Developmental Therapy Model

5. Certification. I certify that to the best of my knowledge and belief this report (consisting of this and subsequent pages and attachments) is correct and complete in all respects, except as may be specifically noted herein.

Karen R. Davis

Karen R. Davis
Project Director
Rutland Center
125 Minor Street
Athens, Georgia 30606

Overview of 1981-1982 Results

This part of the report lists the results of the various aspects of outreach project activities during 1981-1982 in an overview. Detailed information on each of the outreach project activities is contained in other sections of this annual report.

Overall Results:

- THERAPEUTIC CLASSROOM SERVICES TO 549 SEVERELY EMOTIONALLY DISTURBED/ MIXED HANDICAPPED PRESCHOOL CHILDREN AND THEIR PARENTS AND TEACHERS WERE OFFERED IN 12 MODEL UTILIZATION SITES:

Table 1

Overview of Services Provided to Emotionally Disturbed/Mixed Handicapped Children

Location	Number of Sites	Number of Children Served	Dollars Spent on Providing Services
Model Utilization Sites	12	549	$1,580,576
Demonstration (Continuation)			
Rutland Center	1	111	$ 199,433
TOTAL	13	660	$1,780,009

MODEL UTILIZATION SITES IN SPECIFYING "SOURCES AND AMOUNTS OF FUNDING" REPORTED A TOTAL OF $1,580,576, WHICH INDICATES FOR EACH DOLLAR THE SEP-HCEEP INVESTED IN THIS OUTREACH PROJECT ($115,962) A RETURN OF AT LEAST THIRTEEN AND ONE-HALF PROGRAM DOLLARS WAS REALIZED IN THE TWELVE MODEL UTILIZATION SITES (see Appendix C, Table C-2).

In facilitating these services to handicapped preschoolers and their parents and teachers, the outreach project provided services which are outlined below for each outreach activity.

Section A - Information Dissemination and Demonstration Activities:

- 65 persons in 34 states and 1 foreign county were sent information and materials concerning the Model (see Table 2).

- 14 persons in 10 states and 1 foreign country were sent in-depth follow-up information and materials concerning the Model (see Table 2).
- 100 requests were received from persons in 20 states who were sent audio-visual packages (see Table 2).
- 43 persons from 10 states and 1 foreign country visited the Demonstration Site (see Table 2).
- 19 formal presentations in 12 states were provided to approximately 421 persons (see Table 3).
- 500 persons received information through displays and exhibits (see Table 3).
- 5 professional publications relating to the Developmental Therapy Model were completed, and 1 issue of the Developmental Therapy Newsletter was prepared and distributed (see Table 4).

Section B - Services to Model Utilization Sites, Model Utilization Sites In Planning and Other Technical Assistance Activities:

- At least 417 preschool children were screened in the 15 Model Utilization Sites (see Appendix C, Table C-2).
- 372 of the 549 preschool handicapped children served in the therapeutic classes of the 12 Model Utilization Sites were simultaneously enrolled in part-time integrated program experiences (see Appendix C, Table C-2).
- 109 professional and paraprofessional staff members at Model Utilization Sites received in-depth training (see Appendix C, Table C-2).

Section C - Other Outreach Activities:

- Information is included regarding Developmental Therapy Training Workshops offered in various parts of the country.

Section D - In-Service Training:

- Summary statements regarding in-service activities are presented in this section.

Section E - Program Evaluation:

- Outreach services were evaluated by 10 of the 13 Model Utilization Sites.
- Model Utilization Sites were rated on the extent of usage of the Model.

Section F - 1982-1983 Model Utilization Site Obligations as of Reporting Date:

- A minimum of 585 preschool handicapped children and their parents and teachers are projected to be served by at least 13 Model Utilization Sites with 123 staff members and $1,515,946 in obligated resources (see Table 8).

Detailed information on each of these activities follows in the body of this annual report

PART II

ACCOMPLISHMENT REPORT

SECTION A:

INFORMATION DISSEMINATION

AND

DEMONSTRATION ACTIVITIES

Section A

Information Dissemination and Demonstration Activities[a]

Information dissemination and demonstration of the Model includes the dissemination of selected written and audio-visual materials to selected target audiences, site visits to the demonstration center, formal presentations to interested audiences, and authoring selected publications. Table 2 through Table 5 provide a detailed summary of information dissemination and demonstration activities.

Table 2 provides a detailed summary of the dissemination of written and audio-visual materials and the visitors to the demonstration site. Summary statements from Table 2 are:

- 65 persons in 34 states and 1 foreign country were sent information and materials concerning the Model.
- 14 persons in 10 states were sent follow-up in-depth information and materials concerning the Model.
- 100 requests were received from persons in 20 states who were sent audio-visual packages.
- 43 persons from 10 states and 1 foreign country visited the Demonstration Site.

Table 3 indicates that 19 formal presentations in 12 states were made to approximately 421 persons attending such presentations. Additionally, approximately 500 persons received information through displays and exhibits. Publications related to the Model are presented in Table 4.

Twenty information dissemination organizations (Resource Centers, etc.) in 17 states and 1 foreign country were sent information describing the Model for additional dissemination to their local audiences (see Table 5).

---

[a]No information dissemination activities to Model Utilization Sites are included in these summary data. Such efforts are included in "Section B: Services to Model Utilizations Sites, Model Utilization Sites in Planning, and Other Technical Assistance Activities."

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Rutland Center Outreach Project
G008101170

Detailed Summary of Outreach Project's Information Dissemination and Demonstration Activities - 1981-1982

Contents

Table 2: Summary of Information Dissemination Efforts

Table 3: Formal Presentations on Rutland Center-Developmental Therapy Model

Table 4: Publications Related to the Model

Table 5: Information Dissemination Organizations Sent Information and Materials About the Model

No information dissemination or demonstration activities provided to Model Utilization Sites are included in Tables 2-5.

Table 2

Summary of Information Dissemination Efforts

	Number of Different People Sent General Written Information & Materials		Number of Different People Sent Indepth Followup Written Information & Materials		Number of Different Site Visitors		Number of Requests for Audio-Visual Packages	
	Facilitators*		Facilitators*					
Alabama								
Alaska	1							
Arizona								
Arkansas	3	1	1					
California	1		1				16	
Colorado	1		1	1	1		5	
Connecticut	1	1						
Delaware								
Florida		1					1	
Georgia		2	1		10		1	
Hawaii								
Idaho								
Illinois	1	2					1	
Indiana	1	1						
Iowa	1		3				5	
Kansas	2		1				1	
Kentucky	1	1			3			
Louisiana								
Maine		2						
Maryland	1	2						
Massachusetts		1						
Michigan	2	2			6		1	
Minnesota	2	2	1	1			6	
Mississippi							1	
Missouri								
Montana								
Nebraska				1				
Nevada					1		2	
New Hampshire								
New Jersey		3						
New Mexico								
New York		1					6	
North Carolina	1				2		5	
North Dakota								
Ohio	2	1						
Oklahoma	2	1						
Oregon		1			2		2	
Pennsylvania	1		1		4		13	
Rhode Island								

Table 2 (Contd.)

	Number of Different People Sent General Written Information & Materials		Number of Different People Sent Indepth Followup Written Information & Materials		Number of Different Site Visitors		Number of Requests for Audio-Visual Packages	
	* Facilitators *							
South Carolina	1					12		5
South Dakota	1							
Tennessee	2							
Texas		1						
Utah								
Vermont	1							
Virginia		1		1				8
Washington		1						3
Washington, D.C.						1		
West Virginia	1							2
Wisconsin	2	3						1
Wyoming								
Other Countries		1				1		
SUB-TOTALS	32	33		10	4	43		100
TOTALS		65			14	43		100

*This table includes total Information Dissemination efforts for this office. A portion of these efforts were supported through funds from the National Diffusion Network. These figures appear in the columns headed by asterisks and are included to show the total scope of project activity in these areas.

Table 3

Formal Presentations on Rutland Center
Developmental Therapy Model

State	Organizations/Institution	Estimated No. of Persons Attending	Date(s)
California	San Diego County School District Escondido, California Managing Problem Behavior While Promoting Emotional Growth	20	5/10-11/82
California	San Diego County School District Escondido, California Managing Verbal and Physical Aggression	15	5/12/82
California	San Diego County Schools Escondido, California Developmental Therapy: An Overview of the Model, Stages and Techniques	28	3/18-19/82
Georgia	Special Education Awareness Conference Georgia Facilitator Center Savannah, Georgia An Overview of Developmental Therapy	19	2/17/82
Georgia	University of Georgia Creative Arts: EXC 702 Athens, Georgia Music in the Developmental Therapy Model	18	3/11/82
Georgia	University of Georgia Introduction to Exceptional Children Athens, Georgia Overview of Developmental Therapy	30	4/26/82
Georgia	YMCA Camp Waco Waco, Georgia Autism: An Overview to Characteristics and Techniques	16	6/24/82

Table 3 (Contd.)

State	Organization/Institution	Estimated No. of Persons Attending	Date(s)
Hawaii	HEDDS-Hawaii Education Dissemination Diffusion Systems Honolulu School District Honolulu, Hawaii Overview of Developmental Therapy	28	5/19/82
Hawaii	HEDDS-Hawaii Education Dissemination Diffusion Systems Honolulu, Hawaii Overview of The Developmental Therapy Model	60	9/18-20/81
Iowa	Preschool Program Western Hills AEA Sioux City, Iowa Overview of Developmental Therapy: Stages and Techniques	34	12/2/81
Maine	Maine Special Education Conference Augusta, Maine Developmental Therapy: An Overview	33	2/12/82
Maine	Maine Special Education Conference Bangor, Maine Developmental Therapy: An Overview	12	2/11/82
Michigan	Michigan Special Education/ Title IV-C Cooperative Project: Validated Practices Awareness Sessions East Lansing, Michigan Developmental Therapy: An Overview	10	2/4-5/82
Minnesota	State Facilitator Office ESCU Marshall, Minnesota Developmental Therapy: An Overview	10	11/9/81

Table 3 (Contd.)

State	Organization/Institution	Estimated No. of Persons Attending	Date(s)
New Jersey	Preschool Awareness Spring Symposium New Brunswick, New Jersey Developmental Therapy: An Overview	20	6/1-2/82
North Carolina	Division of Development Department of Public Instruction Raleigh, North Carolina Developmental Therapy: An Overview	13	9/21-23/81
South Carolina	South Carolina School for the Deaf and Blind Spartanburg, South Carolina Overview of the Developmental Therapy Model	11	9/8/81
Tennessee	Rhea County School District Dayton, Tennessee An Overview of Developmental Therapy	14	10/30/81
Virginia	NDN National Conference Arlington, Virginia Effective Subnetworking	30	6/15/82
Total: 19 formal presentations in 12 states were provided to 421 persons.			
Displays and Exhibits			
Texas	Council for Exceptional Children Houston, Texas	375	4/12-16/82
Washington, D.C.	HCEEP-DEC Early Childhood Conference	125	12/7-11/82

* This table includes total Formal Presentations by this office. A portion of these efforts were supported through funds from the National Diffusion Network.

Table 4

Publications Related to the Model

Developmental Therapy Newsletter, Geraldine Williams and Sara Williams, editors. Athens, Georgia. The National Technical Assistance Office and The Developmental Therapy Institute, Spring 1982. (See Appendix for a copy of this issue.)

Robinson, J. Stafford, Wood, M.M., and Combs, Carolyn, 1982. The Developmental Therapy Rating Inventory of Teacher Skills and Technical Report. University of Georgia, Athens, Georgia.

Bledsoe County Developmental Therapy Adaptation Project

Boynton, Thelma (ed.) 1982. A Primary Curriculum: A Developmental Approach. Bledsoe County School District, Pikeville, Tennessee.

Boynton, Thelma (ed.) 1982. Administrative Manual. Bledsoe County School District, Pikeville, Tennessee.

Boynton, Thelma (ed.) 1982. Training Packet and Video: The Child, The Teacher, The Classroom. Bledsoe County School District, Pikeville, Tennessee.

Table 5

Information Dissemination Organizations
Sent Information and Materials About the Model

State	City	Agency
Arkansas	Little Rock	State Department of Education Special Education Section
Colorado	Longmont	Colorado Facilitator Project
Connecticut	Bloomfield	Capitol Region Education Council Special Education Coordination
Georgia	Athens	Georgia Facilitator Center
Illinois	Peoria	The Peoria 0-3 Outreach Project
Indiana	Logansport	Indiana Facilitator Center
Iowa	Sioux City	Area Education Agency #12
Michigan	Lansing	Michigan State Facilitator
Minnesota	Marshall	Southwest West Central Educational Cooperative Service Unit
Minnesota	Staples	Northern and Central Minnesota State Facilitator Project
Nebraska	Lincoln	Nebraska Department of Education State Facilitator Project
New Jersey	Glassboro	Glassboro State College
North Carolina	Chapel Hill	Technical Assistance Development Systems
Ohio	Columbus	Ohio Facilitator Center Ohio Department of Education
Ohio	Athens	Ohio University College of Education
Oklahoma	Tahlequah	Special Education Department Northeastern State University
Pennsylvania	King of Prussia	Project RISE Pennsylvania State Facilitator
Tennessee	Knoxville	Tennessee Statewide Facilitator Project

Table 5 (Contd.)

State	City	Agency
Wisconsin	Madison	Wisconsin Department of Public Instruction State Facilitator Office
Canada	Lethbridge Alberta	The University Lethbridge

SECTION B:

SERVICES TO MODEL UTILIZATION SITES,

MODEL UTILIZATION SITES IN PLANNING,

AND OTHER TECHNICAL ASSISTANCE ACTIVITIES

Section B

Services to Model Utilization Sites, Model Utilization Sites In Planning, and Other Technical Assistance Activities

Table 6 is a summary of the outreach assistance provided to each of the Model Utilization Sites and Model Utilization Sites In Planning. The entries in the cells of this table are the number of face-to-face contact days at either the Model Utilization Site or the Demonstration Site. Many of the site visits required more than one outreach staff person to accomplish the site visit objectives, however, this table reflects only the total days of contact to the site, not the number of staff days.

As Table 6 indicates, there are four basic services provided to the sites by the Outreach Project: information dissemination, program planning and design, training for staff in model utilization, and program evaluation. A total of 110 days of service were rendered in these four areas.

1. Information Dissemination: Each site received information in the form of written materials, correspondence, and telephone communications. These information dissemination services were much more in-depth and individualized than those summarized in Section A (for general audiences) of this report due to the information needed by those using or commited to using the Model.

2. Program Planning and Design: Table 6 indicates a total of 17 days of program planning and design assistance were provided. Six New Sites received 9½ days, three Continuation Sites received 3½ days, and three In Planning Sites received four days.

3. Training for Staff in Model Utilization: Table 6 indicates a total of 84 days of training transpired. New Sites received 41½ days, Continuation Sites received 26½ days, and In Planning Sites received 16 days.

   The most utilized outreach assistance was that of training in the Developmental Therapy Curriculum Model. A program must use this component in order to receive any outreach assistance.

4. Program Evaluation: Table 6 indicates that a total of 9 days of evaluation was provided to five New Sites and two Continuation Sites, (see Section E for detailed summaries of Program Evaluation efforts).

Table 7 shows, by a month-to-month breakdown, a total of 139 face-to-face contact days of service provided by the Technical Assistance Office. This service includes:

1. Technical assistance delivered to Model Utilization Sites and Model Utilization Sites In Planning.

2. Program Planning visits to potential Model Utilization Sites.

3. General technical assistance site visits for dissemination of the Model.

4. Number of days visitors were scheduled at the Demonstration Site for orientation or training.

Table 6

Summary of Technical Assistance (# of Face-to-Face Contact Days)
for Model Utilization Sites
July 1, 1981-June 30, 1982

Kinds of Outreach (Technical Assistance) Services	Projected Locations	Livermore, CA CS	Atlanta, GA NS	Aiea, HA NS	Duluth, MN NS	Mankato, MN CS	Winston-Salem, NC NS	Toledo, OH IP	Chester, PA CS	CA #4 Mental Health Philadelphia, PA IP	Dayton, TN IP	Pikeville, TN CS	Rutland, VT NS	Benton-Franklin Head Start Richland, WA NS									
a. Information Dissemination		X	X	X	X	X	X	X	X	X	X	X	X	X									
b. Program Planning and Design																							
1) Program Administration																							
2) Model Component Selection																							
3) Staff and Physical Facility Requirements																							
4) Budgets and Costing Procedures			3	1	1	½	1½		1	2	2	2	2	1									17
c. Training -for staff in Model Utilization																							
1) Identification and Referral																							
2) Intake and Diagnostics																							
3) Treatment (Curriculum) Model																							
4) School Followthrough																							
5) Parent Services																							
6) Program Evaluation																							
7) DTORF Training																							
8) Institute Follow-up		4	11	6	9	5½	3½	4	10	9	3	7	7	5									84
d. Evaluation																							
1) Quality of Model Utilization																							
2) Quality of Technical Assistance			1		1		1		1	1		2	1	1									9
TOTAL DAYS		4	15	7	11	6	6	4	12	12	5	11	10	7									110

CS=Continuation Site (more than one year of technical assistance); NS=New Site (first year of technical assistance); IP=In Planning (negotiations underway to possibly become a new site).

Table 7

Summary of Days Technical Assistance Provided
During Reporting Period

Program Classification / State / FY Months	Livermore, CA CS	Atlanta, GA NS	Aiea, HA NS	Duluth, MN NS	Mankato, MN CS	Winston-Salem, NC NS	Toledo, OH IP	Chester, PA CS	CA #4 Mental Health Philadelphia, PA IP	Dayton, TN IP	Pikeville, TN CS	Rutland, VT NS	Benton-Franklin Head Start Richland, WA NS	Program Planning Visits*	General Technical Assistance Visits**	Visitors to Demonstration Site*	Special Workshops	San Diego, California	Aiea, Hawaii	SUB-TOTALS
July																3				3
Aug.		3			3						5	2								13
Sept.	1	1	1										3	1						7
Oct.		2		3		2		3		1	2		1		2	3				19
Nov.		1			3							2								6
Dec.		2														1				3
Jan.		2							1				1			3				7
Feb.		1						2	2	2	2	4				3				16
Mar.	3	1	4	3										1			2	4		18
Apr.		1		4		2		1	3											11
May		1	2					1	4	2			2	1			3			16
June				1		2	4	5	2		2	2		1	1					20
Total Contact Days																				139

28

IP=In Planning (Negotiations underway to possibly become a new site);

CS=Continuation Site (more than one year of technical assistance); NS=New Site (first year of technical assistance

*These Columns include total number of days providing the information described and are exclusive of technical assistance to model utilization sites. A portion of these activities were provided to programs which later were included in project activities supported through funds from the National Diffusion Network.

**This column includes number of days providing the information described.

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SECTION C:

OTHER OUTREACH ACTIVITIES

Section C

Other Outreach Activities

While the preparation and certification of teachers to work with young handicapped children is a recent and fast growing trend in special education, the focus of teacher training in this area has expanded to include not only pre-service training, but also continuing education. Teachers with training and certification in one or more areas of special education are seeking training in early education for the handicapped. Teachers with pre-service training and associated certification in special education for young handicapped children are seeking additional specialized training in early education (e.g., parent training, infant stimulation, categorical special skills). The continuing education needs are being met by degree and non-degree programs. The demand for this type of training is increasing.

While there is a basic body of knowledge and skill which is required by the teacher for successful work with young handicapped children, there is an increasing wealth of knowledge and related skills which must be delivered to the teacher of young handicapped children now and in the future.

In responding to these identified needs in the field, two training options have been developed: Developmental Therapy Short-Term Workshops and Developmental Therapy Institute Training.

- Developmental Therapy Short-Term Workshops. These workshops involve the participant in two to five days of training in the Developmental Therapy Model. The training covers basic philosophy, practical application and evaluation adaptations of the Developmental Therapy Model. As of this reporting period fifteen workshops have been provided. Five have been conducted at the Demonstration Site, and two were conducted in San Diego, California. Eight were conducted at Model Utilizations Sites in Pikeville, Tennessee; Dayton, Tennessee; Duluth, Minnesota; Rutland, Vermont; Richland, Washington; Philadelphia, Pennsylvania; Aiea, Hawaii; and Toledo, Ohio. In addition, one workshop, Music in the Developmental Therapy Model, was held in Savannah, Georgia. A total of approximately 188 professionals have received this type of training.

- Developmental Therapy Institue Training. This institute involves the participant in four to eight weeks of intensive training in the use of the Developmental Therapy Curriculum. This institute provides:

    a) A comprehensive curriculum for enhancing social emotional growth of emotionally and behaviorally disturbed young children.

    b) A common understanding of goals, objectives, techniques, and procedures for implementing the curriculum.

    c) A service prototype with clearly defined roles, skills needed, and system for service delivery.

d) An effective and useful accountability system for both internal and external evaluation.

As of this reporting date, two staff members from two Model Utilization Sites have attended the Developmental Therapy Institute offered through the University of Georgia in Athens, Georgia.

SECTION D:

IN-SERVICE TRAINING

Section D

In-Service Training

Although all 1981-1982 Technical Assistance Staff had four or more years of experience with the Developmental Therapy Model, one staff member was new to the area of technical assistance. Thus, in-service training for 1981-1982 was accomplished in the following manner:

1. One in-service meeting was held for staff and training consultants functioning as staff members. These meetings were aimed at up-dating staff in current developments in the Model and most recent training materials used for instructing others in the Model.

2. Each staff member continued sharpening existing technical assistance skills by critiquing the planning, delivery, and evaluation of all technical assistance services.

3. Staff members and Staff Training Consultants attended sessions or workshops in Early Childhood or Special Education as follows:

Conference	Number of Staff Attending	Dates
NAMT National Conference Denver, Colorado	1	11/5-8/82
DEC-HCEEP Conference on Early Childhood Washington, D.C.	1	12/7-11/81
*International CEC Convention Houston, Texas	5	4/12-16/82
NAMT Southeastern Regional Conference Columbia, South Carolina	1	4/22-24/82
*National Diffusion Network Conference Washington, D.C.	1	6/14-18/82

*These efforts were partially supported through funds from the National Diffusion Network.

SECTION E:

PROGRAM EVALUATION

Section E

Program evaluation focussed both on the quality and quantity of outreach assistance provided by this project to the Model Utilization Sites and on the quality and quantity of services provided to preschool handicapped children and their parents by the Model Utilization Sites.

1. Quality and Quantity of Outreach Assistance

   Ten of the Model Utilization Sites returned a completed "Summary Evaluation of Technical Assistance Services Provided by the Outreach Project" form concerning those services provided during 1981-1982.

   Table 8 contains a summary of these completed forms. As indicated by this summary and the comments, the Model Utilization Sites were generally satisfied with the quality and quantity of outreach assistance.

2. Quality and Quantity of Services to Preschool Handicapped Children by Model Utilization Sites

   The evaluation of the quality and quantity of services to preschool handicapped children by the Model Utilization Sites was accomplished through site visits to selected sites by two person teams or through final yearly visits by staff. The purpose of the visits was to validate the data provided by the participating agencies, determining the quality of their applications of the Developmental Therapy Model, and their perceptions of the quality of technical assistance services. (See Appendix C.) These teams were composed of a program evaluation specialist (Advisory Council Member), and a treatment specialist (Outreach Project Staff). Not all sites could be visited for such an evaluation; a small representative sampling of sites was selected for visitation. Upon completion of each of the site visits (N=5), the evaluators completed the "Supplemental Site Visit Form". This form consisted of ratings on thirteen (13) factors and comments on the strengths and weaknesses of each of the participating programs. The evaluators used the following five point scale: 5=Excellent; 3=Good; 1=Poor. A summary of these ratings is contained in Table 9.

   Other selected sites not receiving end-of-year evaluation visits were rated on the Developmental Therapy Rating Inventory of Teacher Skills, formerly the Developmental Therapy Verification Form during the final training visit of the year. This form indicates in percentages the extent of usage of the Developmental Therapy Model. The data from this form is contained in Table 10. However, it should be noted that data from a particular site is not necessarily inclusive of all classrooms, but rather a sampling of the total program. Appendix E contains a copy of the form used to obtain this data.

Additional evaluative information is contained in the following Appendices:

Appendix A:	Evidence of Parent Participation Effectiveness of Demonstration (Continuation) Site and Model Utilization Sites
Appendix B:	Evidence of Child Progress by Model Utilization Sites
Appendix C:	Table C-2: 1981-1982 Descriptors of Model Utilization Sites

3. Other

Evaluation of other objectives of this outreach effort are indicated in the previous sections of this report. Additional evaluative information is contained in Section F - Projected 1982-1983 Model Utilization Site Obligations as of Reporting Date. Section F contains information concerning the expansion of the services for the Model Utilization Sites in 1982-1983.

The use of Regional Certified Developmental Therapy Trainers was to be piloted, on a limited basis, this year in an effort to decrease travel expenditures. The project assisted in the training of one person, Ms. Liz Ventura, from the West and utilized the services of several other consultants previously trained. Ms. Ventura assisted in three workshops within her area. These were achieved with only minimum local costs, therefore minimizing the travel due to the lack of airfare.

Additonally, regional trainers as consulting staff provided a minimum of 41 days of training to sites or conducted workshops in their specific areas. In these instances, expenses incurred were always less than if a staff member had conducted the training. This means of serving sites through regional training is being continued during the 1982-1983 year.

Table 8

Sites Summary Evaluations of Technical Assistance Services
Provided by Outreach Project
1981-1982

1. In what area(s) did you receive assistance and of what value was it to you?

Area of Assistance	Site	Rating[a]
Information Dissemination:	Livermore, CA	b
	Atlanta, GA	4
	Aiea, HA	c
	Duluth, MN	4
	Mankato, MN	d
	Winston-Salem, NC	4
	Toledo, OH	c
	Chester, PA	4
	Philadelphia, PA	5
	Dayton, TN	5
	Pikeville, TN	5
	Rutland, VT	5
	Richland, WA	5
Program Planning and Design:	Livermore, CA	b
	Atlanta, GA	3
	Aiea, HA	c
	Duluth, MN	4
	Mankato, MN	5
	Winston-Salem, NC	4
	Toledo, OH	c
	Chester, PA	4
	Philadelphia, PA	4
	Dayton, TN	5
	Pikeville, TN	5
	Rutland, VT	5
	Richland, WA	5
Training:	Livermore, CA	b
	Atlanta, GA	5
	Aiea, HA	c
	Duluth, MN	5
	Mankato, MN	5
	Winston-Salem, NC	4
	Toledo, OH	c
	Chester, PA	4
	Philadelphia, PA	2
	Dayton, TN	5
	Pikeville, TN	5
	Rutland, VT	5
	Richland, WA	5

[a] Rating scale continuum was 1 (Very Little Value) through 5 (Great Value)

[b] No report

[c] No reporting requested; this program is a site In-Planning

[d] Program did not indicate receiving this assistance

Table 8 (Contd.)

Program Evaluation:	Livermore, CA	b
	Atlanta, GA	d
	Aiea, HA	c
	Duluth, MN	5
	Mankato, MN	5
	Winston-Salem, NC	d
	Toledo, OH	c
	Chester, PA	5
	Philadelphia, PA	3
	Dayton, TN	5
	Pikeville, TN	5
	Rutland, VT	5
	Richland, WA	5

2. Did you receive assistance when you needed it? 10 Yes ___ No

GEORGIA

Atlanta: yes - Program Planning Design component we were unaware of - we believe that a portion of the training program should be devoted to Supervisors/Administrators re: the data collection requirement and role of Technical Assistance Person.

MINNESOTA

Duluth: yes - Including phone calls when necessary

Mankato: yes - Monitoring by Tony Beardsley was very helpful; my absence from work this spring, however, prohibited another on-site visit.

NORTH CAROLINA

Winston-Salem: No comment

PENNSYLVANIA

Chester: yes - Training assistance was provided when a new developmental team member was added to replace our departing lead teacher.

Philadelphia: No comment

TENNESSEE

Dayton: No comment

Pikeville: No comment

VERMONT

Rutland: yes - Assistance was gained through site visits or by telephone

WASHINGTON

Richland: No comment

Table 8 (Contd.)

3. What are some indicators that your technical assistance needs have (or have not) been met?

GEORGIA

Atlanta:
- We have seen growth in teacher's performance as a result of Technical Assistance
- Data collection for Technical Assistance by staff, support staff, etc. - this should have been addressed prior to Technical Assistance arriving.
- Staff member was encouraged to pursue further training as a result of Technical Assistance.

MINNESOTA

Duluth:
- Providing techniques/tools to deal more effectively in the classroom with emotionally disturbed children
- Via DTORF re-evaluations, children have shown much progress.

Mankato:
- More self-assuredness on the part of the staff
- Staff members have felt comfortable giving in-services to others
- Less frustration and more "moving ahead and not balking" by the teachers

NORTH CAROLINA

Winston-Salem:
- Plans are currently being made for evaluation of our consultation service - to be instituted this summer.
- Long-range goals have been established in several areas concerning the classroom.

PENNSYLVANIA

Chester:
- Needs have been met.
- Three visits from Sara Williams, our technical assistant.
- Training provided for new staff person and a smooth transition occurred.
- Two new people attended training in October, 1981.

Philadelphia:
- Sufficient time was not readily available so that people could take advantage of the training available.
- There were always youngsters in the program.

TENNESSEE

Dayton:
- The staff that attended the workshops have demonstrated an understanding of the program.

Pikeville:
- Participant Survey attached.

Table 8 (Contd.)

VERMONT

Rutland:
- I made it through the year using Developmental Therapy!
- The children have shown progress on the DTORF.

WASHINGTON

Richland:
- We feel that our staff (3) is knowledgeable in the basic philosophy and design of the Rutland Model and that we are capable of replication of the model with a few modifications.

4. What technical assistance needs now remain (if any) in the area(s) which was/were covered by the National Technical Assistance Staff?

GEORGIA

Atlanta:
- Continuation of training, interface of technical assistance with our "in house" person (Mona Scott).

MINNESOTA

Duluth:
- We would like more training in Stage III.
- New staff will need additional training.

Mankato:
- None that I can think of - always we have support staff turnover, but they seem to be learning "OK" as they go.

NORTH CAROLINA

Winston-Salem:
- Further work with classroom teachers in management techniques, decoding, and planning by objectives.

PENNSYLVANIA

Chester:
- Continued guidance in parent involvement and communicating classroom techniques to parents.
- Techniques for monitoring and debriefing.
- Techniques for writing parent progress reports on children

Philadelphia:
- The staff have not gone through enough of the training to really utilize the objectives. Also, no one is close enough to certification.

TENNESSEE

Dayton:
- None.

Pikeville:
- No comment.

VERMONT

Rutland:
- More training for higher stages.

Table 8 (Contd.)

WASHINGTON

Richland: - More training in the effective use of the Group DTORF and DTORF Summary.

5. If technical assistance needs remain to be met, what are some suggested means by which National Technical Assistance can meet those needs?

GEORGIA

Atlanta:
- Advanced short term training for those already trained and using the program for a year.
- Have at start of year all reports needing to be completed by end of year.

MINNESOTA

Duluth: - Trainers need to train new staff, resulting from lay-offs of Spring '82 - effective Fall '82.

Mankato: - I may need help - lots of it!

NORTH CAROLINA

Winston-Salem: - Further emphasis on classroom techniques by National Technical Assistance Office consultant.

PENNSYLVANIA

Chester:
- Longer de-briefing periods and instruction when classroom is not in session.
- Written format for progress reports with a manual.

Philadelphia: - We need to perhaps modify the model to the numbers of youngsters we service.

TENNESSEE

Dayton: - Evaluation of program

Pikeville: - No comment.

VERMONT

Rutland: - On-site visits

WASHINGTON

Richland:
- Site visits - Workshops
- Sending us audio/visual training materials

Table 8 (Contd.)

6. What are some specific statements which reflect your degree of satisfaction (and/or dissatisfaction) with both the National Technical Assistance Staff and the technical assistance services which were provided to you?

GEORGIA

Atlanta:
- We were very satisfied with staff assigned - could have used more time the first year to facilitate transition.

MINNESOTA

Duluth:
- After the initial DTORF was done, little-by-little we began to feel more secure in working with children with emotional needs. Children (through direct observation and DTORF re-evaluations) showed definite progress.

Mankato:
- I feel that we have been well "taken care of" by your staff - you genuinely care about delivering quality services to kids and we know you care about us and how well we're implementing the model, how kids are being taught, whether they are learning and how the teaching staff is functioning as a unit.

NORTH CAROLINA

Winston-Salem:
- No comment.

PENNSYLVANIA

Chester:
- The Developmental Center staff has had a good rapport with the National Technical Assistance staff.
- Answers and guidance were always available. Communication was highly encouraged.

Philadelphia:
- Information was interesting and was valuable however, the presentor lacked the ability to hold the groups attention.

TENNESSEE

Dayton:
- The National Assistance staff has always been supportive and positive in nature.
- The technical assistance services have been appropriate in suiting our needs.

Pikeville:
- The technical assistance services provided an on-going monitoring of project goals and their implementation.

Table 8 (Contd.)

VERMONT

Rutland: - Karen Davis gave assistance in a very non-threatening manner. She has been very available for assistance by phone.

WASHINGTON-

Richland: - Karen Davis and Sara Williams provided an excellent 3-day workshop in September, 81. Our initial training needs were met at that time.
- Sara Williams made 3 site visits during the school year. Her suggestions and comments were very helpful.

7. General Comments:

GEORGIA

Atlanta: - We have found the program to be very beneficial and would like to keep it and expand it in the future.

MINNESOTA

Duluth: - Well worth the training. We did think there could be less paperwork involved.

Mankato: - I, personally, am really excited about this upcoming school year. I will be teaching a class myself - mostly behavior disordered boys - with untrained support teachers. I am welcoming the challenge, but apprehensive at the same time. Thanks for everything!

NORTH CAROLINA

Winston-Salem: - Our specific needs as expressed to the consultant are always met - with lots of "goodies" left over. Faye gave us a structure and a direction to pursue in establishing evaluation criteria for our consultation process. We continue to need technical assistance help to upgrade our classroom.

PENNSYLVANIA

Chester: - There was always a good balance of positive and negative feedback. We are looking forward to continued assistance from Rutland during 1982-1983 program year.

Philadelphia: - No comment.

Table 8 (Contd.)

TENNESSEE	
Dayton:	- No comment.
Pikeville:	- No comment.
VERMONT	
Rutland:	- As a 12 year teacher of Special Education, I have used many behavior techniques. I found Developmental Therapy very difficult to carry out at the beginning of the year. As the year is drawing to an end, I can see that Developmental Therapy is an excellent program to make children aware of their behavior. My children have shown a great deal of progress this year. I have also gained tremendous insight into the reasons why children behave as they do.
WASHINGTON	
Richland:	- The National Technical Assistance staff that I had personal contact with (Karen and Sara) were both knowledgeable and experienced in working with children. We, the Head Start staff value their constructive criticism and appreciate the amount of time they spent with us. The use of the Rutland model in our program has improved the quality of education for our special needs children.

Table 9

Summary of Ratings on Supplemental Site Visit Form

Ratings: 1 = Poor, 3 = Good, 5 = Excellent	Atlanta, GA.	Duluth, MN.	Winston-Salem, NC	Rutland, VT	Richland, WA.		$\bar{X}$
1. Staff Preparedness	3	5	4	5	4		4.2
2. Staff Morale	3	3	3	5	4		3.6
3. Administrative Support	3	4	5	5	5		4.4
4. Physical Facilities	3	5	5	4	4		4.2
5. Therapeutic Environment	3	4	4	5	5		4.2
6. Staff Training Program	4	5	4	5	5		4.6
7. Support for Para-professional	3	5	4	5	4		4.2
8. Family Involvement	2	2	4	2	3		2.6
9. Effectiveness and Efficiency of Data System/Evaluation	3	3	3	4	3		3.2
10. Effectiveness in Returning Children to Regular School	3	3	3	4	NA		3.25
11. Quality of Therapeutic Treatment	3	5	4	5	4		4.2
12. Quality of Use of DT Treatment Model	3	5	5	4	4		4.2
13. Potential for Continuation of Quality Services	5	4	5	5	5		4.8
Total-------	41	53	53	58	50		51.65
$\bar{X}$ ----------	3.15	4.08	4.08	4.46	4.17		3.97

*Not Observed

Table 10

Sample Ratings on the Developmental Therapy
Rating Inventory of Teacher Skills (DT/RITS)

		Pre	Post
Administrative Checklist			
Atlanta, GA			55%
Duluth, MN		65%	72%
Chester, PA		57%	90%
Philadelphia, PA		33%	17%
Rutland, VT		71%	76%
Richland, WA		80%	88%
Classroom Ratings			
Atlanta, GA	(3)		56%
Duluth, MN	(4)	83%	95%
Chester, PA	(2)	84%	97%
Philadelphia, PA	(3)	49%	65%
Rutland, VT	(1)	70%	94%
Richland, WA	(1)	54%	93%

( ) Number of classes used in rating

SECTION F:

PROJECTED 1982-1983 MODEL UTILIZATION SITE

OBLIGATIONS AS OF REPORTING DATE

Section F

Projected 1982-1983 Model Utilization Site Obligations as of Reporting Date

Sufficient resources have been obligated by Model Utilization Sites or Model Utilization Sites In Planning (including at least 123 professional and paraprofessional staff) to serve a minimum of 585 children during 1982-1983. Table 12 indicates the location of the site by city, the number of handicapped preschool children to be served in therapeutic classes (and parents receiving services, number of staff, funding sources, and funding amounts.)

Table 11

Model Utilization Sites Projected Obligations (1980-1981)
As of Report Date

Model Utilization Site By City Identification	Estimated Number of Preschool Handicapped Children to be Served in Therapeutic Classes	Number of Staff			Funding Source(s)	Estimated Funding Level
		Profes-sional	Para-Profes-sional	Site Total		
Hollister, California	30	7	4	11	State, Local	Not reported
Atlanta, Georgia	40	8	4	12	State	$195,052
Aiea, Hawaii	7	5	0	5	Not reported	Not reported
Bangor, Maine	30	8	0	8	Not reported	Not reported
Van Buren, Maine	12	6	1	7	State, Local	$21,500
Duluth, Minnesota	60	15	6	21	PL 94-142; State; Local; Preschool Incentive Grant	$190,000
Granite Falls, Minnesota	20	2	1	3	Not reported	Not reported
Winston-Salem, North Carolina	10	3	2	5	Mental Health; Private Foundation Local	$64,250
Toledo, Ohio	32	5	4	9	Not reported	Not reported
Chester, Pennsylvania	16	4	1	5	Health and Human Services	$966,384
Altamont, Tennessee	300	12	15	27	State, Local	Not reported

Table 11

Model Utilization Sites Projected Obligations (1980-1981)
As of Report Date

Model Utilization Site By City Identification	Estimated Number of Preschool Handicapped Children to be Served in Therapeutic Classes	Number of Staff			Funding Source(s)	Estimated Funding Level
		Profes-sional	Para-Profes-sional	Site Total		
Rutland, Vermont	8	4	1	5	State; Local	$35,281
Richland, Washington	20	5	0	5	Head Start; Local; School Districts	$,43,479
TOTALS	585	84	39	123		$1,515,946

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APPENDICES

APPENDIX A

Table A-1: Evidence of Parent Participation Effectiveness of Demonstration (Continuation) Site

Table A-2: Evidence of Parent Participation Effectiveness of Model Utilization Sites

Table A-1

Evidence of Parent Participation Effectiveness
of Demonstration (Continuation) Site

Site	Number of Parents of Children Aged 0-8-11 Served[a]	Number of Contacts		Hours of Service	
		Face-to-Face	Telephone	Face-to-Face Contacts	Telephone Contacts
Rutland Psycho-educational Center Athens, Georgia	111	767	956	534	124

[a]Number of parents served may be greater than number of children served in therapeutic classes because of screening/intake services.

[b]Services include intake, parent planning conferences, end-of-quarter treatment conferences, conferences, observation, home visits, parent auxiliary meetings, and other face-to-face contacts.

Table A-2

Evidence of Parent Participation Effectiveness of Model Utilization Sites*

	Total Number of Parents Served[a]	Total Number of Contacts	Total Hours of Service[b]
CALIFORNIA			
Livermore	7	213	286
GEORGIA			
Atlanta	27	519	336
HAWAII			
Aiea	11	2	8
MINNESOTA			
Duluth	118	542	647
Mankato	23	494	545
NORTH CAROLINA			
Winston-Salem	13	165	213
PENNSYLVANIA			
Chester	12	87	137
Philadelphia	45	279	432
TENNESSEE			
Dayton	10	12	13
Pikeville	50	1323	1300
VERMONT			
Rutland	6	16	84

*In-Planning Sites are not included in this list, since technical assistance and reporting data would not begin until becoming a New Site.

[a]Number of parents served may be greater than number of children served in therapeutic classes because of screening/intake services.

Table A-2

Evidence of Parent Participation Effectiveness
of Model Utilizations Sites*

	Total Number of Parents Served[a]	Total Number of Contacts	Total Hours of Service[b]
WASHINGTON			
Richland	15	106	315
TOTAL	337	3758	4316

[b]Services include intake, parent planning conferences, end-of-quarter treatment conferences, classroom training/observation, home visits, parent meetings, and other contacts.

APPENDIX B

Evidence of Child Progress by Model Utilization Sites

Table B-1: Livermore, California
Table B-2: Atlanta, Georgia
Table B-3: Winston-Salem, North Carolina
Table B-4: Duluth, Minnesota
Table B-5: Mankato, Minnesota
Table B-6: Chester, Pennsylvania
Table B-7: Pikeville, Tennessee
Table B-8: Rutland, Vermont
Table B-9: Richland, Washington

Child Progress Data

The child progress data is presented in a new format. Recent studies with the Developmental Therapy Objectives have shown that pre-post comparisons reveal more when the child's percent of mastery is compared with 100% mastery in any one curriculum area. Additionally, any one group's mastery, compared pre and post, can be seen at a glance on the graph.

The line graphs are demarcated at 10% intervals. It is to be noted that the percent of objectives required mastery in each stage is bracketed underneath each graph line. At the end of the Behavior Graph, 33 objectives indicates how many behavior objectives are in all five stages for 100% total. There are 35 communication objectives, and so on.

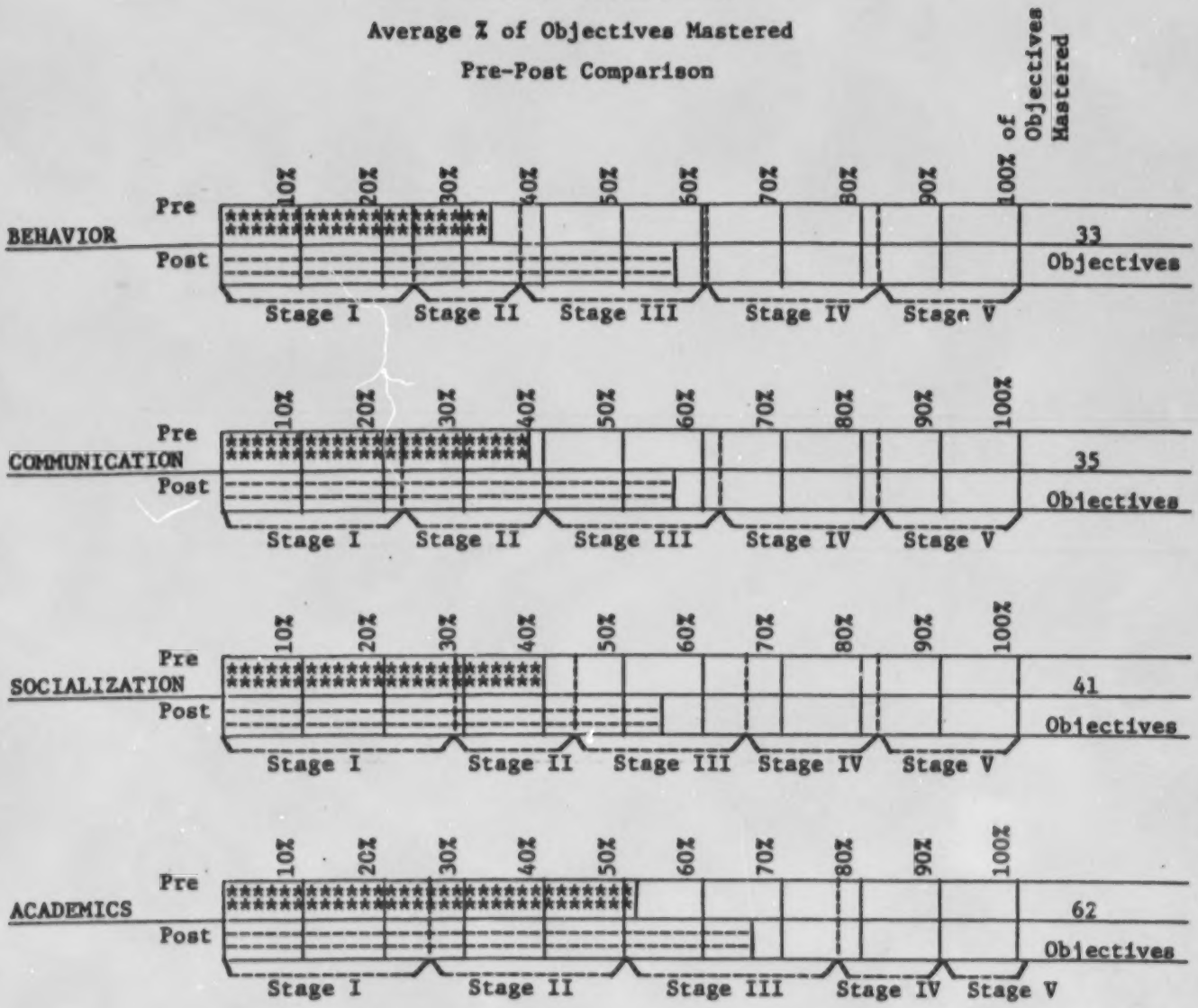
Table B-1

Livermore Unified School District
Livermore, California

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison



171 Total Objectives

Site Livermore
Class/Teacher 1 class (7 children)
Pre Date 9/81
Post Date 6/82
Time Between
Pre and Post 10 months for all
Mean Age 8-2 as of 9/81

Mean number of months in treatment = 9 (for all)

I.D. #'s used: 005-0006, 0008, 0009, 0010, 0011, 0013

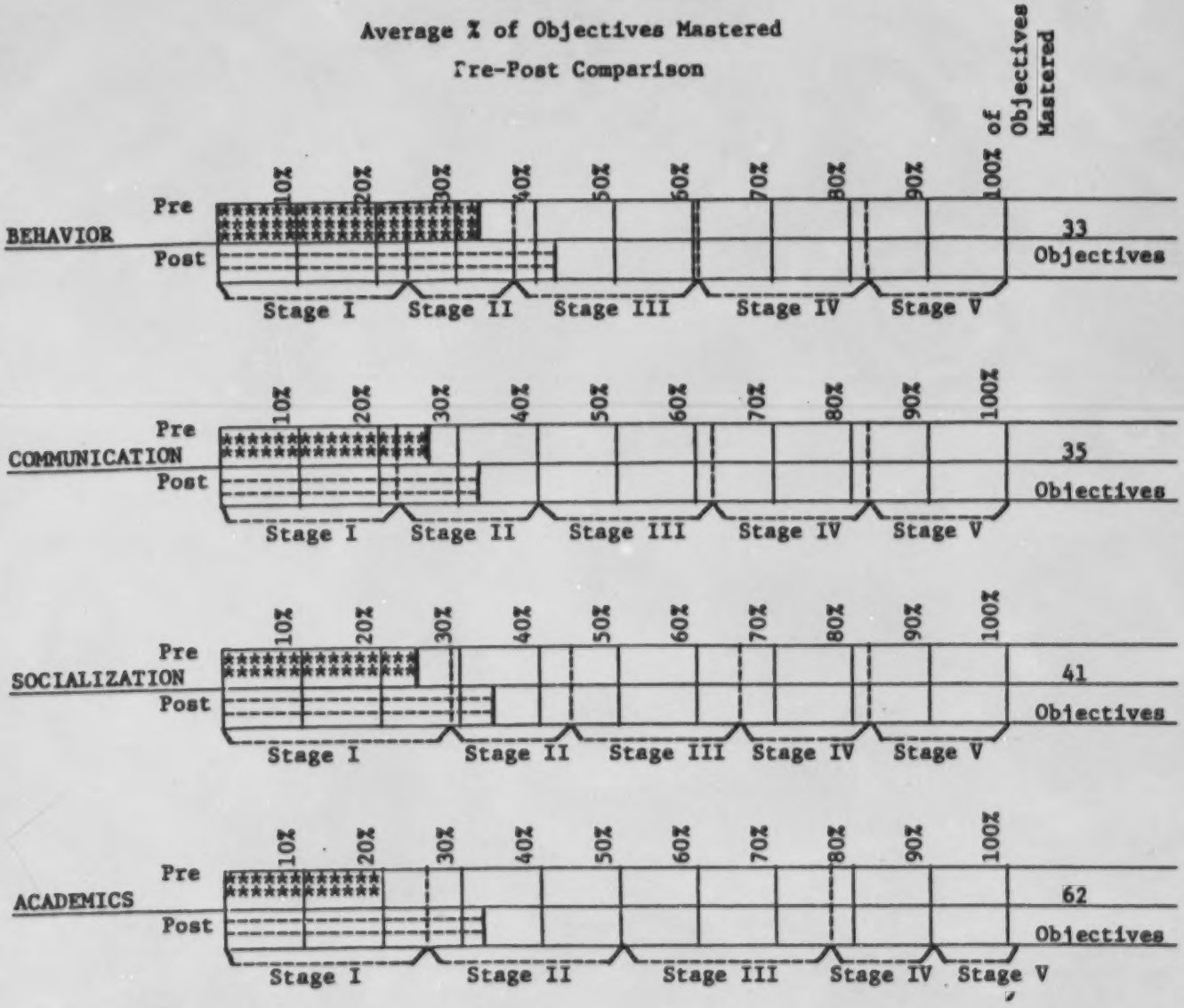
Table B-2

North Metro Children's Center
Atlanta, Georgia

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison



171 Total Objectives

Site North Metro
Class/Teacher 3 classes (21 children)
Pre Date 10/1/81 approx.
Post Date 4/30/82 approx.
Time Between
Pre and Post Average= 7 months
Mean Age 5 - 1 as of 10-1-81

Mean number of months in treatment = 8.8 mos. (for all)

Table B-3

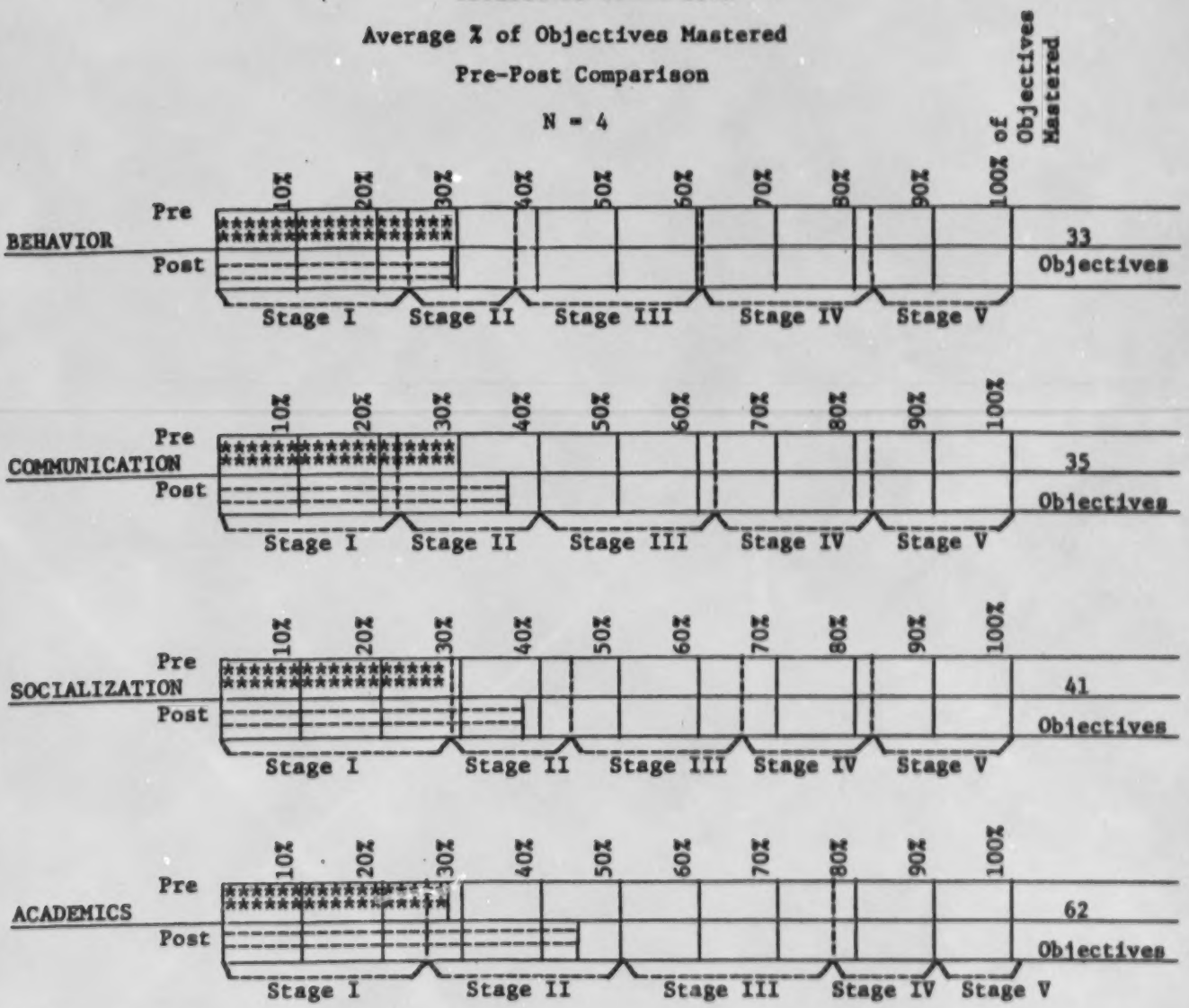
Preschool Enrichment Program
Winston-Salem, North Carolina

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison

N = 4



171 Total Objectives

Site Preschool Enrichment Program
Class/Teacher 1 class (4 children)
Pre Date 10/1/81
Post Date 5/31/82
Time Between
Pre and Post Average - 6.6 months
Mean Age 4-10 as of 10/1/81

Mean number of months in treatment = 10 months (for all)

I.D.#'s used: 090-0001-0019 0022 0023 0025

I.D.#'s not used: 090-0001-0020 0021 0024 0026

Table B-4

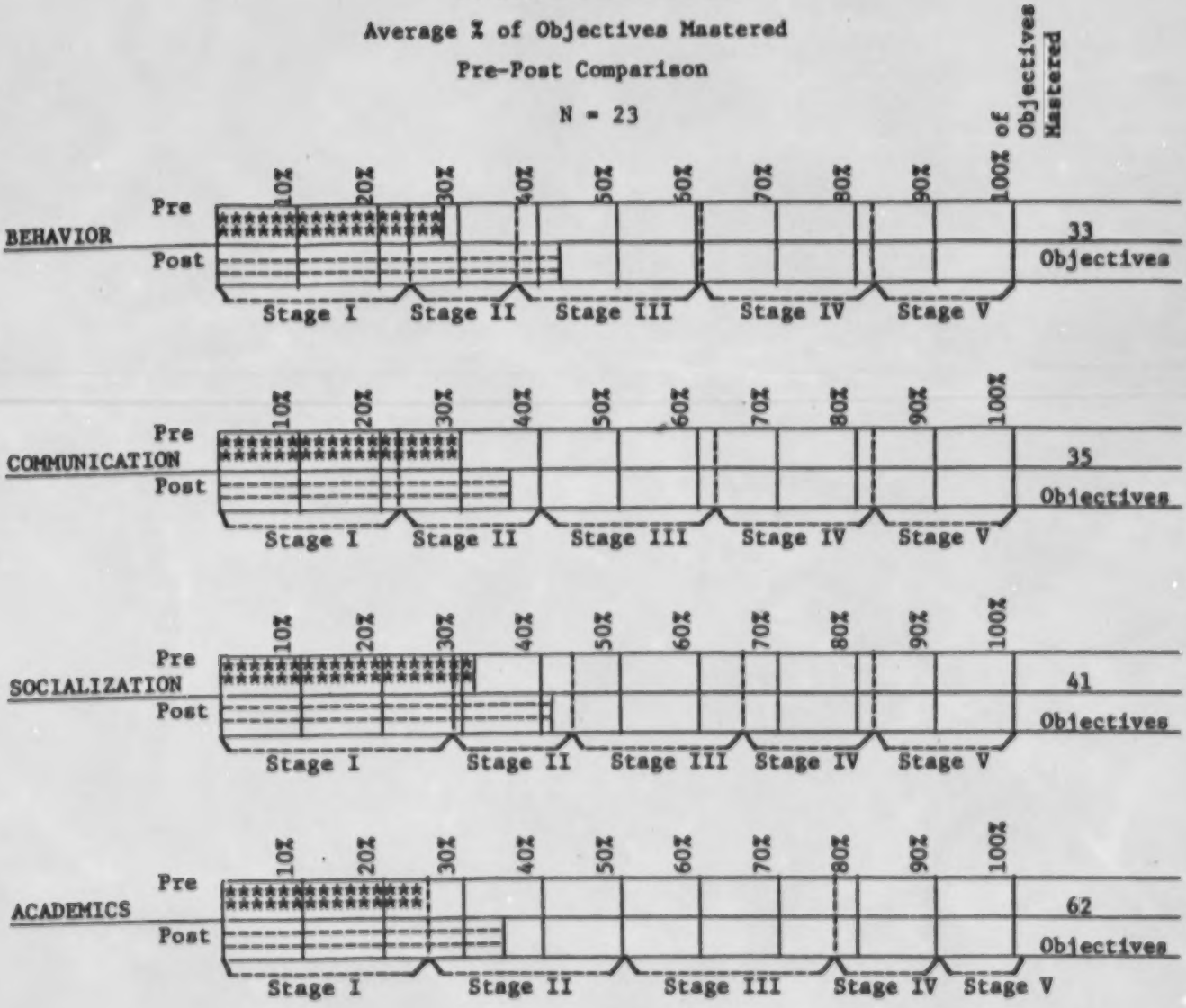
Independent School District #709
Duluth, Minnesota

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison

N = 23



171 Total Objectives

Site Independent School District #709
Class/Teacher 3 classes (23 children)
Pre Date 10/15/81
Post Date 4/15/81
Time Between
Pre and Post Average = 6.3 months
Mean Age 5-5 as of 10/15/81

Mean number of months in treatment = 10 months for all

I.D.#'s used: 004-0001-0009, 0014-0015, 0017-0018, 0020, 0023-0031

I.D.#'s not used: 004-0010-0014, -0016, -0019, -0021

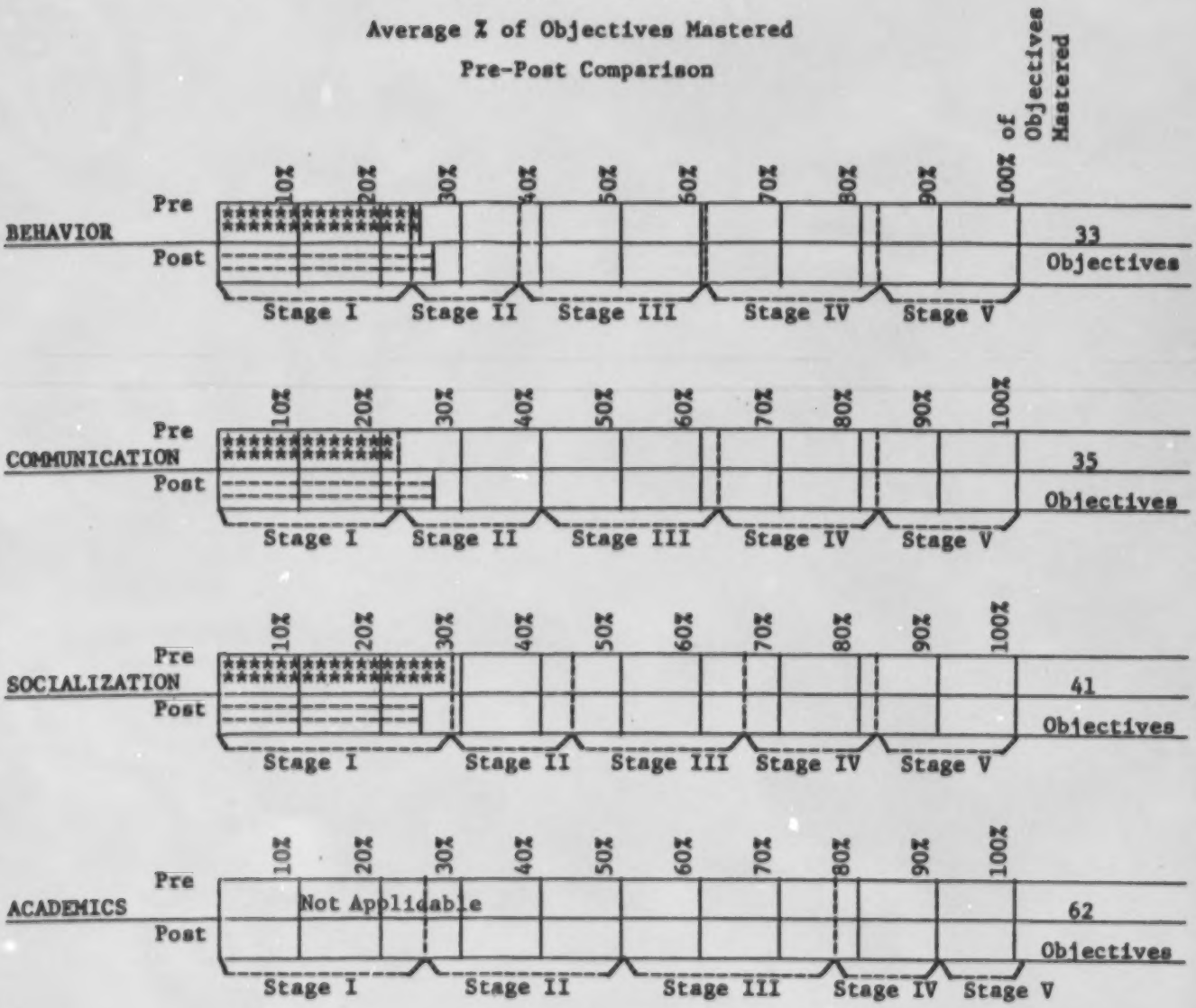
Table B-5

Independent School District No. 77
Mankato, Minnesota

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison



Site Independent School District #77
Class/Teacher 2 classes (16 children)
Pre Date 10/20/81
Post Date 5/12/82
Time Between Pre and Post Average = 6 months
Mean Age 7-11 as of 10/20/81

171 Total Objectives

Mean number of months in treatment = 9 months

I.D.#'s used: Not given

I.D.#'s not used: Not given

Table B-6

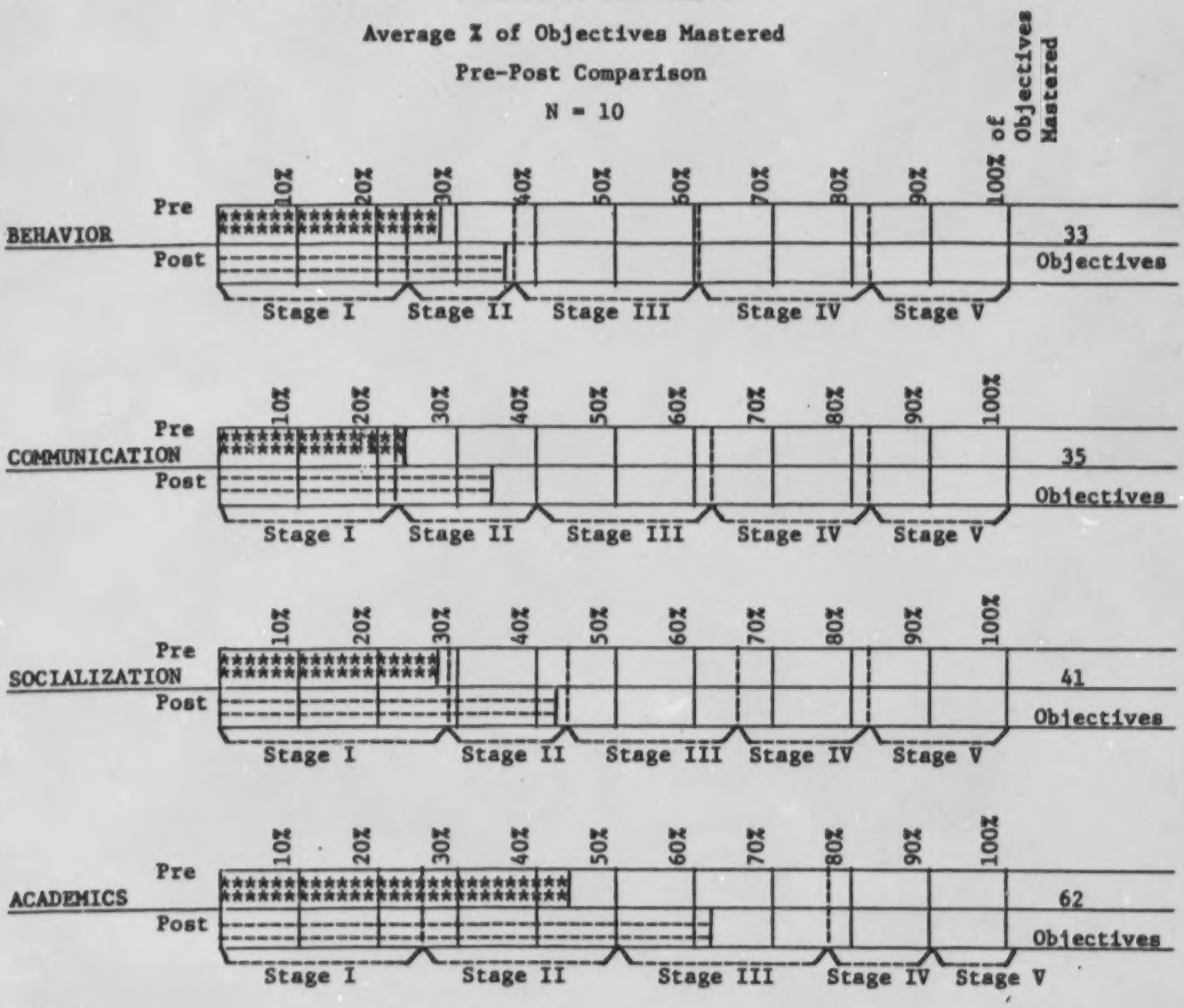
C.A.N. Headstart
Chester, Pennsylvania

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison

N = 10



171 Total Objectives

Site C.A.N. Headstart
Class/Teacher 1 class (10 children)
Pre Date 11/20/81
Post Date 3/15/82
Time Between Pre and Post Average = 3.5 months
Mean Age 4-5 as of 11/20/81

Mean number of months in treatment = 3.6

I.D.#'s used: 095-001-008
-010
-011

I.D.#'s not used: 095-001-009

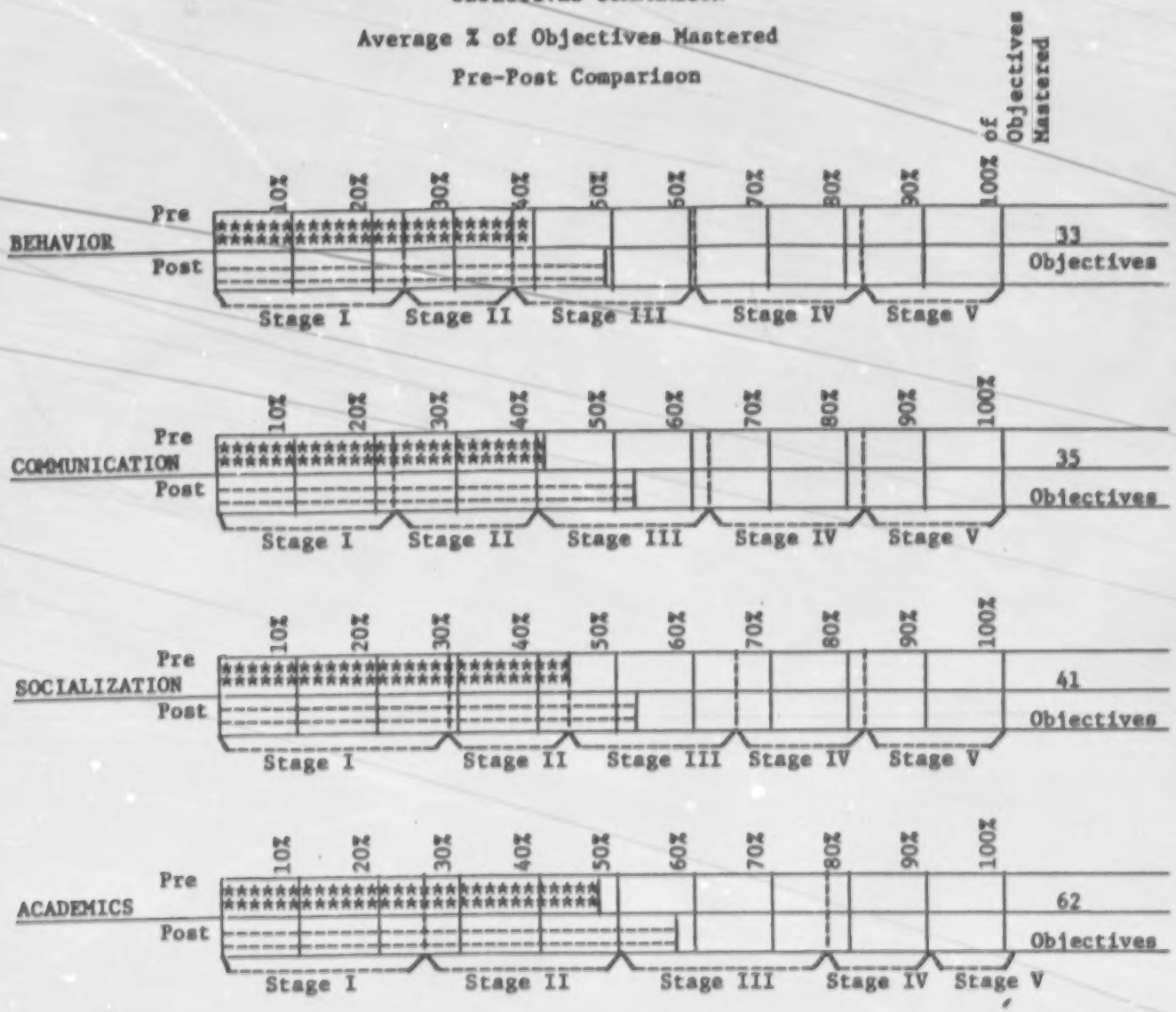
Table B-7

Bledsoe County School District
Pikeville, Tennessee

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison



171 Total Objectives

Site Bledsoe County School District
Class/Teacher 11 classes (214 children)
Pre Date 9/1/81
Post Date 4/30/82
Time Between
Pre and Post Average = 7.7 months
Mean Age 6-2 as of 9/1/81

Mean number of months in treatment = 9

Bledsoe County School District

I.D.#'s used:

040-
1074-1091
1501-1512
1514,1515
1532 -
1550-1556
1558
1560
1561-1564
1566-1570

2501-2502,2505
2507,2514,2516
2535,2540,2541
2547,2556,2558
2575,2576,2578-2584
2586-2588
2590,2591,2593-2595
2597,2599-2606
2612-2614,2620-2646
3115,3150,3153,3156-3165
3168-3173,3175,3180-3185
3188,3191-3194,3196,3198,
3199,3201-3204
3210-3237
3240-3264

I.D.#'s not used:

1565
2527
2536
2610
2696
3151
3167
3174
3197
3207

Table B-8

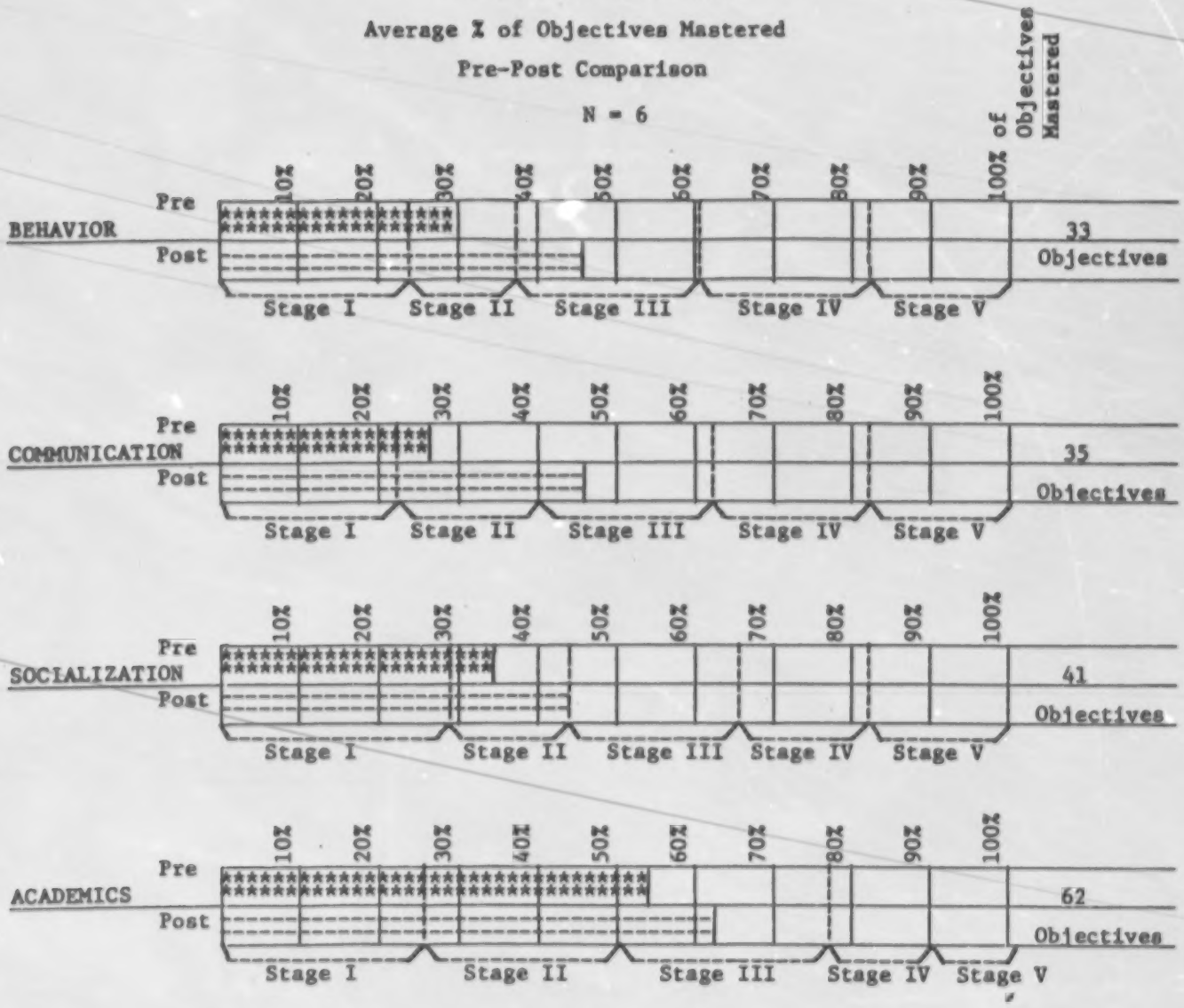
Rutland Public Schools
Rutland, Vermont

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison

N = 6



171 Total Objectives

Site Northeast School
Class/Teacher 1 class (6 children)
Pre Date 9/20/81
Post Date 5/30/82
Time Between
Pre and Post Average = 8 months
Mean Age 7-8 as of 7/1/81

Mean number of months in treatment = 10 months (for all)

I.D. #'s used: 006-0001-0006 Not used: None

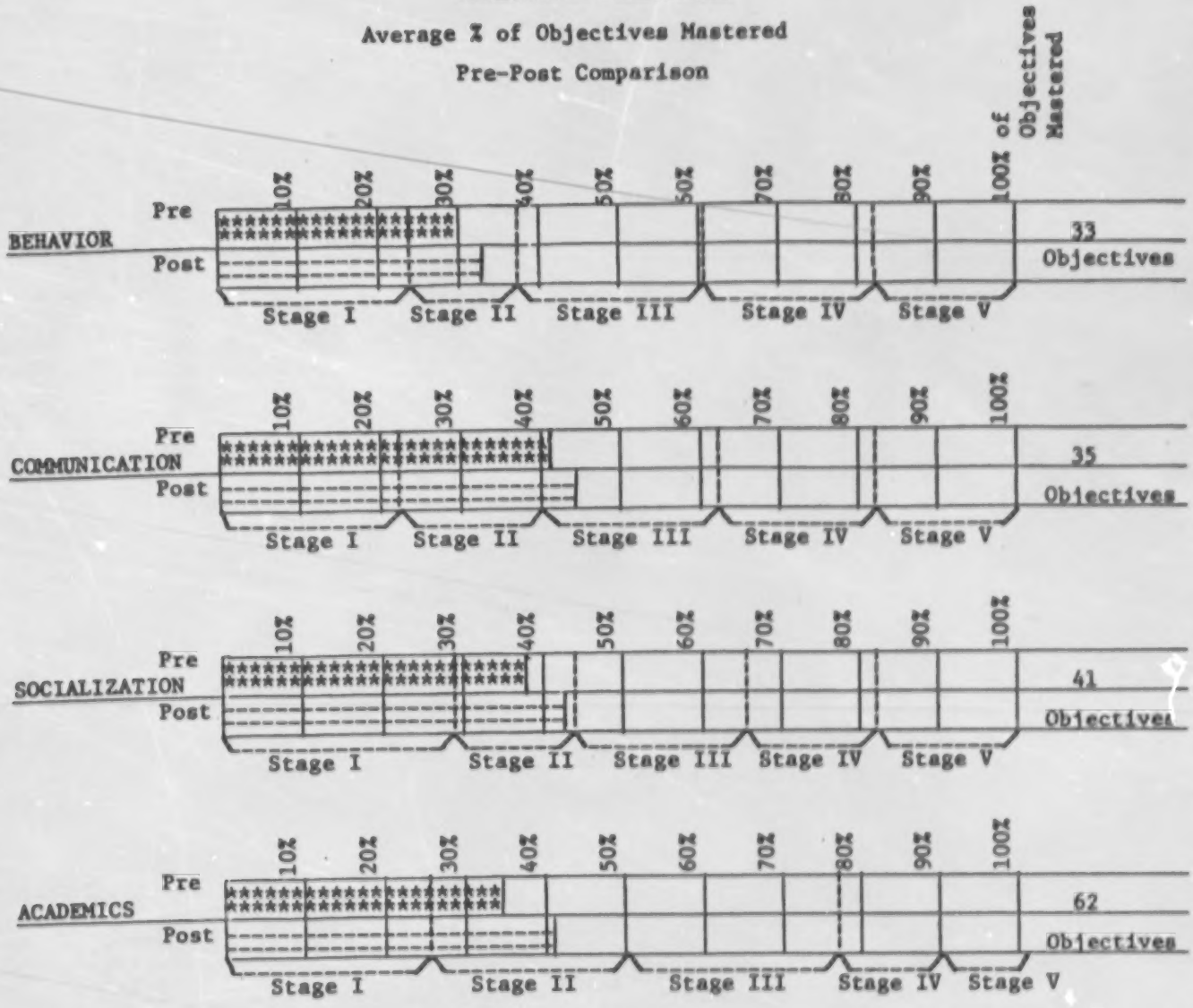
Table B-9

Benton-Franklin Head Start
Richland, Washington

DEVELOPMENTAL THERAPY
OBJECTIVES COMPARISON

Average % of Objectives Mastered

Pre-Post Comparison



171 Total Objectives

Site Benton-Franklin Head Start
Class/Teacher 1 class (13 children)
Pre Date 10/16/81
Post Date 5/7/82
Time Between
Pre and Post Average - 7 months
Mean Age 4-7 as of 10/16/81
Mean number of months in treatment = 4.2

I.D.#'s used: 001-0001, 0002, 0004, 0005, -0006-0011, -0013-0015

I.D.#'s not used: -0003, -0012

APPENDIX C

Programs Stimulated by Outreach Activities

Table C-1: Model Components Utilized by Model Utilization Sites

Table C-2: 1981-1982 Descriptors of Model Utilization Sites

Table C-1

Model Components Utilized by Model Utilization Sites

Model Utilization Site and Location	Model Components[a]																			
	Referral Form Checklist (RFCL)	Profile Analysis Plot	Developmental Therapy Objectives	DT Objectives Rating Form (DTORF)	Group DTORF	DTORF Summary	Developmental Therapy Verification Form (DTVF)	School/Agency Contact Card	Parent Participation Card	Child Involved in Mainstream of Normal Experience	Individual Programs Within the Group	Treatment Team-Lead Teacher Sup. Tchr., Parent Worker	Debriefing	Assignment to Classes by Stages	School Liaison	Back-up Professional Clinical Support	DTORF Rating at Specific Intervals	Training Needs Questionnaire	Training Session Evaluation Form	Individualized Educ. Prog. (I.E.P.) (D.T. or Agency)	Number of Additional Forms
Livermore Valley Unified School District Livermore, California	X	-	X	X	X	X	X	-	-.	X	X	X	X	X	XM	X	X	-	-	X	-
North Metro Children's Center Atlanta, Georgia	X	-	X	X	X	X	X	X	X	-	X	X	X	X	X	X	X	-	X	X	4
Alvah Scott Elementary Central Oahu District Aiea, Hawaii	-	-	X	X	-	X	X	-	-	X	X	XM	XM	-	X	X	XM	X	X	X	-
Early Childhood Handicapped Program Duluth Public Schools Duluth, Minnesota	-	-	X	X	X	X	-	-	-	XM	X	XM	X	XM	-	X	X	-	-	X	-
Independent School District #77 Bryon and Pleasant Mankato, Minnesota	-	-	X	X	X	X	X	-	-	XM	X	X	X	XM	X	X	X	-	-	X	-

[a] "X" = Utilized, "XM" = Utilized with modification, "-" = Not utilized, "NR" = Not reported

Table C-1

Model Components Utilized by Model Utilization Sites

Model Utilization Site and Location	Model Components[a]																			
	Referral Form Checklist (RFCL)	Profile Analysis Plot	Developmental Therapy Objectives	DT Objectives Rating Form (DTORF)	Group DTORF	DTORF Summary	Developmental Therapy Verification Form (DTVF)	School/Agency Contact Card	Parent Participation Card	Child Involved in Mainstream of Normal Experience	Individual Programs Within the Group	Treatment Team-Lead Teacher Sup. Tchr., Parent Worker	Debriefing	Assignment to Classes by Stages	School Liaison	Back-up Professional Clinical Support	DTORF Rating at Specific Intervals	Training Needs Questionnaire	Training Session Evaluation Form	Individualized Educ. Prog. (I.E.P.) (D.T. or Agency)	Number of Additional Forms
Preschool Enrichment Program Forsyth-Stokes Mental Health Center Winston-Salem, North Carolina	X	-	X	X	X	X	X	-	-	XM	X	X	X	XM	XM	X	X	-	X	-	-
Developmental Center C.A.N. Headstart Chester, Pennsylvania	X	-	X	X	X	X	X	-	-	X	X	X	XM	X	XM	X	X	X	X	X	1
Catchment Area #4 Therapeutic Classroom Philadelphia, Pennsylvania	-	-	X	XM	XM	XM	-	-	-	X	X	X	XM	X	X	X	XM	-	-	-	-
Rhea County Department of Education Special Education Department Dayton, Tennessee	-	-	X	X	X	X	-	-	-	NR	XM	XM	XM	XM	NR	-	XM	-	-	-	-
Bledsoe County Pikeville, Tennessee	-	-	X	X	X	X	X	-	-	X	X	XM	XM	XM	XM	X	XM	-	X	X	-

[a] "X" = Utilized, "XM" = Utilized with modification, "-" = Not utilized, "NR" = Not reported

Table C-1

Model Components Utilized by Model Utilization Sites

Model Utilization Site and Location	Model Components[a]																				
	Referral Form Checklist (RFCL)	Profile Analysis Plot	Developmental Therapy Objectives	DT Objectives Rating Form (DTORF)	Group DTORF	DTORF Summary	Developmental Therapy Verification Form (DTVF)	School/Agency Contact Card	Parent Participation Card	Child Involved in Mainstream of Normal Experience	Individual Programs Within the Group	Treatment Team-Lead Teacher Sup. Tchr., Parent Worker	Debriefing	Assignment to Classes by Stages	School Liaison	Back-up Professional Clinical Support	DTORF Rating at Specific Intervals	Training Needs Questionnaire	Training Session Evaluation Form	Individualized Educ. Prog. (I.E.P.) (D.T. or Agency)	Number of Additional Forms
Experimental I Rutland City Public Schools Rutland, Vermont	X	-	X	X	X	X	-	-	-	-	X	XM	X	X	-	X	X	NR	X	X	-
Benton-Franklin Head Start Richland, Washington	X	-	X	X	XM	XM	X	-	-	X	X	X	X	XM	-	X	X	-	X	-	1

[a] "X" = Utilized, "XM" = Utilized with modification, "-" = Not utilized, "NR" = Not reported

Table C-2

1981-1982 Descriptors of Model Utilization Sites[b]

Model Utilization Site	No. of Staff: Professional	No. of Staff: Paraprofessional	No. of Staff: Total	Estimated Funding Amount and Sources	Number Of New Children Screened This Yr.	Number of Children Assessed	No. of Preschool Children Served in Classes & Parents Receiving Services	No. of Preschool Children Terminated	No. of Preschool Children Simultaneously Enrolled in Part Time Integrated Program
Livermore Valley Unified School District Livermore, California	1	1	2	$43,989	5	7	7	6	7
North Metro Children's Center Atlanta, Georgia	7	3	10	$47,320	15	17	31	9	1
Alvah Scott Elementary Central Oahu District Aiea, Hawaii	7	0	7	Not reported	Not reported	Not Reported	11	0	11
Early Childhood Handicapped Program Duluth Public Schools Duluth, Minnesota	5	4	9	$192,995	72	72	72	10	0
Independent School District #77 Bryon and Pleasant Mankato, Minnesota	3	2	5	$102,475	38	33	23	1	6

Table C-2

Descriptors of Model Utilization Sites[b]

Model Utilization Site	No. of Staff: Professional	No. of Staff: Paraprofessional	No. of Staff: Total	Estimated Funding Amount and Sources	Number Of New Children Screened This Yr.	Number of Children Assessed	No. of Preschool Children Served in Classes & Parents Receiving Services	No. of Preschool Children Terminated	No. of Preschool Children Simultaneously Enrolled in Part Time Integrated Program
Preschool Enrichment Program Forsyth-Stokes Mental Health Center Winston-Salem, NC	3	2	5	$70,461	25	25	13	7	2
Developmental Center C.A.N. Headstart Chester, Pennsylvania	4	0	4	$966,384 *	14	14	11	10	11
Catchment Area #4 Therapeutic Classroom Mental Health/Mental Retardation Program Philadelphia, Pennsylvania	4	4	8	Not reported	60	Not reported	45	Not reported	Not reported
Rhea County Department of Education Special Education Department Dayton, Tennessee	7	2	9	$38,100	10	10	10	4	10
Bledsoe County Developmental Therapy Adaptation Project Pikeville, Tennessee	31	10	41	$61,500	151	151	305[a]	0	305

Table C-2

Descriptors of Model Utilization Sites[b]

Model Utilization Site	No. of Staff: Professional	No. of Staff: Paraprofessional	No. of Staff: Total	Estimated Funding Amount and Sources	Number Of New Children Screened This Yr.	Number of Children Assessed	No. of Preschool Children Served in Classes & Parents Receiving Services	No. of Preschool Children Terminated	No. of Preschool Children Simultaneously Enrolled in Part Time Integrated Program
Experimental I Rutland City Public Schools Rutland, Vermont	5	1	6	$33,250	12	12	6	0	4
Benton-Franklin Head Start Richland, Washington	3	0	3	$24,102	15	0	15	9	15
TOTAL	80	29	109	$1,580,576	417	341	549	56	372

[a]Data from this site includes both handicapped and non-handicapped children. This site has adapted the model for use in the regular education kindergarten and first grade where the handicapped children are served.

[b]There was one Sites-In Planning included in the Model Utilization Sites that was not requested to furnish this information since services will be more fully implemented in the 1982-1983 year.

APPENDIX D

Table D-1: Teacher Training Institutions Requesting Information About the Model

Table D-1

Teacher Training Institutions

Requesting Information About the Model

College and Universities

Arkansas

UAMSC
Child Study Center
Little Rock, Arkansas

Illinois

University of Illinois at Urbana-Champaign
Urbana, Illinois

New Jersey

Glassboro State College
Savitz Library
Glassboro, New Jersey

Ohio

Ohio University
College of Education
Athens, Ohio

Oklahoma

Northeastern State University
Special Education Department
Tahlequah, Oklahoma

Oregon

Oregon College of Education
Monmouth, Oregon

Washington

Central Washington University
Ellinsburg, Washington

Canada

The University Lethbridge
National Institute on
Mental Retardation
Lethbridge Alberta
Canada

APPENDIX E

DEVELOPMENTAL THERAPY RATING INVENTORY OF TEACHER SKILLS

DEVELOPMENTAL THERAPY
RATING INVENTORY OF TEACHER SKILLS
(DT/RITS)

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Developmental Therapy
Rating Inventory of Teacher Skills*
(DT/RITS)

The Developmental Therapy Rating Inventory of Teacher Skills (DT/RITS) is a systematic observational rating process for rating teacher skills after an extensive classroom observation period of between one and two hours. The inventory contains 304 skill items. These items are divided into four rating forms with a separate form for each of the stages in Developmental Therapy. Within each rating form the items are organized into three subsections: (1) activities, (2) materials, and (3) teacher techniques. The DT/RITS is to be used by observers who have received training in its use or by teachers for self-monitoring purposes.

Recording Procedure

The format used to record the observed teacher skills is a modification of the present-absent format. The rater observes the entire class and then rates the teacher using the appropriate stage rating form. A five choice rating format requires the rater to make judgments about the presence or absence of the skills, and also, the degree to which the skills are used effectively. Thus, the ratings can be used to differentiate between the teacher who demonstrates a skill effectively and consistently from one who demonstrates the skills but is less effective or inconsistent.

There are five rating categories for the DT/RITS:

Yes (Y)	The activities, materials or techniques are being used.
No (N)	The activities, materials or techniques are not being used.
Partially (P)	The activities, materials, or techniques are being used but are not being used consistently with all the children or are not used all of the time with the group.
Not Needed (NN)	The activities, materials, or techniques are not used because they are not needed for that child or group during that specific time.
Not Seen (NS)	The activities, materials, or techniques are not seen due to the physical absence of the evaluator. The NS category is no reflection on what the teacher(s) is doing in the class.

Scoring Procedure

The teacher's effectiveness is determined by tallying the total number of skills rated "Yes" and dividing this number by the total number of skills that were rated. This number is then multiplied by 100 to obtain the teacher's effectiveness percentage score. The step-by-step procedures are as follows:

1. Count the number of skills that are rated "Yes" (Activities, materials, or techniques are being used). This number is labeled Y.

2. Count the number of skills that are rated "No" (Activities, materials, or techniques are not being used). This number is labeled *N*.

---

*For information on instrument development, validity, and reliability see *Technical Report for the Developmental Therapy Rating Inventory of Teacher Skills* (Robinson, Wood, and Combs, 1981).

3. Count the number of skills that are rated "Partially" (Activities, materials, or techniques are being used but are not being used consistently). This number is labeled *P*.

4. Compute the teacher's effectiveness percent, using the following formula:

$$\frac{Y}{Y + N + P} \times 100$$

Note that the No (N) and Partially (P) are both in the denominator which means that the teacher is only given credit for skills used effectively. Not needed (NN) and Not Seen (NS) are not included in the score.

Effectiveness categories translate the teacher's score into different levels of teacher effectiveness:

Effectiveness Percentage	Effectiveness Category
.95-100	Highly Effective
.71- .94	Effective
.51- .70	Adequate
.31- .50	Less than Adequate
.16- .30	Poor

DEVELOPMENTAL THERAPY
ADMINISTRATIVE CHECKLIST

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Developmental Therapy
ADMINISTRATIVE CHECKLIST

The Administrative Checklist contains 41 items needed within a school for administrative support of teachers using Developmental Therapy.

This rating form is completed after reviewing program descriptions and student IEPs and talking with the teacher/treatment teams and administrators. Because a unique opportunity exists in each school building to mount a highly therapeutic program, a separate rating should be done for each individual building which houses Developmental Therapy classes.

There are four possible rating choices.

Yes - The procedure is being used.

NO - The procedure is not being used.

P (Partially) - The procedure is being used but not consistently with all the children and by all teaching/treatment teams.

INA (Information not available) - It was not possible to obtain sufficient information to make a judgment.

Circle each item as indicated.

An administrative support score is obtained by a simple count of items marked "Yes". The maximum score obtainable is 41. The following criterion levels were established, using the checklist at 28 sites replicating the Developmental Therapy model:

26-41 items present - Demonstration Level (exemplary practices with elements successfully implemented.)
16-25 items present - Adoption Level (sufficient number of elements to implement model)
10-15 items present - Minimum Level (basic elements used)

Developmental Therapy
ADMINISTRATIVE CHECKLIST

Rater: _____

Date: _____ Name of School: _____

Administrative Head of School: _____

Title: _____

Name of Person Responsible for the Daily Implementation of the Developmental Therapy Program in this School: _____

Number of Developmental Therapy Classes in this School: _____

Total Number of Children Enrolled in the Developmental Therapy Program: _____

Names of Lead Teachers in Developmental Therapy Program: _____

_____

Names of Support Teachers (Aides): _____

_____

Names of Others Working as Resources to the Teams: _____

_____

How Was This Rating Obtained? (Check All That Apply)

Talking with Administrators _____

Talking with Teachers _____

Talking with Resource People/Parents _____

Reading Program Description _____

Observation of Program _____

Self-Rating by School Personnel _____

(Names: _____

_____)

THE TEACHING/TREATMENT TEAMS

1. There is more than one Developmental Therapy class (teacher) in a building.	Yes	No	P	INA
2. The Developmental Therapy class has a lead and a support teacher (or aide).	Yes	No	P	INA
3. The support teacher or aide is an actively involved, constructive part of the team.	Yes	No	P	INA
4. Adequate time is allocated for team planning and preparation.	Yes	No	P	INA
5. Adequate time is allocated for team debriefing after class.	Yes	No	P	INA
6. Adequate time is allocated for team to provide mainstream follow-through as needed.	Yes	No	P	INA
7. Adequate time is allocated for school and parent contacts.	Yes	No	P	INA
8. Consultation (support and feedback) is provided to the teams on a scheduled, consistent basis.	Yes	No	P	INA
9. The teams perceive administrative support for their work.	Yes	No	P	INA

SCHOOL LIAISON AND MAINSTREAMING

10. Appropriate mainstreaming placements are available.	Yes	No	P	INA
11. All children have some concurrent placement in a parallel school setting (mainstreaming).	Yes	No	P	INA
12. Teacher in child's regular school placement is involved with the team in planning.	Yes	No	P	INA
13. An educational planning conference including the regular teacher and the Developmental Therapy teacher is held to present results of testing, recommendations, and to plan a supportive mainstream program for the child (at the IEP conference or shortly thereafter).	Yes	No	P	INA
14. The Principal is included in the mainstreaming program planning and implementation.	Yes	No	P	INA
15. Weekly contact is made with the child's regular school teacher to exchange information (e.g., telephone and/or classroom visit).	Yes	No	P	INA
16. Child's regular teacher has visited the Developmental Therapy classroom.	Yes	No	P	INA
17. Child's regular teacher has observed the Developmental Therapy team, when teaching.	Yes	No	P	INA
18. A teaching/treatment team member is available for crisis intervention in the regular education program with children from the Developmental Therapy class.	Yes	No	P	INA

SERVICES TO PARENTS

19. A parent worker is assigned to each child and family.	Yes	No	P	INA

SERVICES TO PARENTS (CONTINUED)

20. A parent planning conference is held to communicate to the parents the test results and to jointly plan the programs to be conducted at home, in the Developmental Therapy class, and in the mainstream.	Yes	No	P	INA
21. Parents are involved with the treatment team in ratings or reviewing the child on the DTORF.	Yes	No	P	INA
22. Parent planning conferences are held as a part of or following the scheduled DTORF ratings.	Yes	No	P	INA
23. Opportunities are available for parents to observe Developmental Therapy classes when needed, with a professional person knowledgeable about their child's Developmental Therapy program.	Yes	No	P	INA
24. Home visits are made by a team member or parent worker when needed.	Yes	No	P	INA

DEVELOPMENTAL THERAPY OBJECTIVES RATING FORM

25. Developmental Therapy Objectives are utilized to ascertain children's levels of functioning and to plan experiences, materials, and strategies.	Yes	No	P	INA
26. The lead teacher, support teacher, parent and/or parent worker/monitor work together as a treatment team to rate the child.	Yes	No	P	INA
27. In using the rating form, at least *one* objective and no more than *four* objectives are used in each of the 4 curriculum areas.	Yes	No	P	INA
28. Objectives are rated sequentially with mastery of previous objectives being necessary before new objectives are initiated. If exception, brief explanation is needed on rating form.	Yes	No	P	INA
29. Each child's appropriate stage is identified according to his general stage of therapy as determined by his average stage of development in the 4 curriculum areas.	Yes	No	P	INA
30. Each child is placed with a developmentally comparable group of children according to DTORF ratings and stages.	Yes	No	P	INA
31. Sizes of groups are appropriate to developmental needs of the children (groups of eight or less).	Yes	No	P	INA
32. The Developmental Therapy Objectives Rating Form is completed for the 1st time after the child has participated in the program for 8 days in order to obtain the child's developmental baseline.	Yes	No	P	INA
33. The DTORF is completed on each child on a predetermined schedule.	Yes	No	P	INA
34. The DTORF is completed on each child at least three times during the year.	Yes	No	P	INA
35. The DTORF is completed on each child at the end of the school year or at termination.	Yes	No	P	INA

36. Children are regrouped on the basis of DTORF results after each scheduled rating.	Yes	No	P	INA
37. A summary DTORF on each child is available to assess and document progress of child.	Yes	No	P	INA
38. A class DTORF is designed to clearly emphasize group objectives and individual differences to facilitate planning activities.	Yes	No	P	INA
39. Each child generally appears to have mastered the objectives that have been checked on the DTORF and is working on objectives that have been marked as goals.	Yes	No	P	INA
40. The DTORF is used as the basis for program and/or curriculum.	Yes	No	P	INA
41. The children are together in the classroom for at least two hours a day.	Yes	No	P	INA

Check One of the Following:

Pre _____

Post _____

Reliability _____

Other _____

DEVELOPMENTAL THERAPY
RATING INVENTORY OF TEACHER SKILLS
DT/RITS

STAGE ONE

Lead Teacher: _____

Support Teacher: _____

Others Working on Team: _____

_____

Children: (first names only)

_____

_____

Length of Observation:

Full Time - Beginning: _____ Ending: _____

or

Partial Time - Beginning: _____ Ending: _____

If partial, list activities observed.

_____

_____

Rater: _____

Date: _____

Agency: _____

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STAGE ONE

ACTIVITIES AND SCHEDULES FOR STAGE ONE

Directions: Circle "Yes" if the following activities and schedules are used.
Circle "No" if the activities and schedules are not used.
Circle "P" (Partially) if the activities and schedules are used but are not used consistently with all children or are not used all the time with the group.
Circle "NN" if the activities or schedules are not needed.
Circle "NS" if the activities or schedules are not seen.

1. Activities are conducted to encourage the participation of each child in the group.	Yes	No	P	NN	NS
2. Activities provide success and promote pleasure-producing responses from the children.	Yes	No	P	NN	NS
3. Activities require no waiting for turns.	Yes	No	P	NN	NS
4. Inside play is included.	Yes	No	P	NN	NS
5. Play equipment is used to stimulate communication.	Yes	No	P	NN	NS
6. Play equipment provides opportunity for socialization.	Yes	No	P	NN	NS
7. Play time is planned to stimulate organization and solitary play.	Yes	No	P	NN	NS
8. Play equipment provides sensory stimuli for arousal and awareness.	Yes	No	P	NN	NS
9. Play equipment stimulates child to activity.	Yes	No	P	NN	NS
10. Story time is included (or some form of symbolic communication activity).	Yes	No	P	NN	NS
11. Story time provides opportunity for physical nurturance with children.	Yes	No	P	NN	NS
12. Material and content are on an appropriate level that the children can understand.	Yes	No	P	NN	NS
13. Opportunity is provided for child to work on indirect communication objectives (e.g., attending to story, producing sounds or words).	Yes	No	P	NN	NS
14. Snack time is included.	Yes	No	P	NN	NS
15. Snack time provides opportunity to stimulate communication and socialization skills.	Yes	No	P	NN	NS
16. Snack time is designed to be motivating and pleasurable.	Yes	No	P	NN	NS
17. Preacademic work time is included.	Yes	No	P	NN	NS
18. Work time tasks include activities planned to focus on children's specific academic objectives.	Yes	No	P	NN	NS
19. Work time is designed to produce pleasure and be motivating.	Yes	No	P	NN	NS

ACTIVITIES AND SCHEDULES FOR STAGE ONE
(Continued)

20. Activities are included such as art, music, and play which provide the opportunity to work on the overall goals for the stage.	Yes	No	P	NN	NS
21. Average activity time is 10 minutes or less.	Yes	No	P	NN	NS
22. Activities requiring physical movement are interspersed with those which are less active.	Yes	No	P	NN	NS
23. Teacher has an alternate activity or "back up" planned to substitute for an unsatisfactory activity.	Yes	No	P	NN	NS
24. Activity does not extend beyond "Peak" of motivation. (Circle "Yes" if activity *does not* extend beyond peak.)	Yes	No	P	NN	NS
25. Before activity begins, teacher demonstrates the activity, when necessary, so each child will understand the task.	Yes	No	P	NN	NS

MATERIALS FOR STAGE ONE

Directions: Circle "Yes" if the following criteria are used in selecting materials.
Circle "No" if the criteria are not used.
Circle "P" (Partially) if the criteria for selecting materials are used but are not used consistently for all children or are not used all the time with the group.
Circle "NN" if the materials are not needed.
Circle "NS" if the materials are not seen.

26. Classroom materials are used for a specific purpose and are chosen as vehicles for the accomplishment of objectives.	Yes	No	P	NN	NS
27. Content of the materials is concrete; sensory.	Yes	No	P	NN	NS
28. Materials are special; arousing.	Yes	No	P	NN	NS
29. Materials are used for individual mobilization.	Yes	No	P	NN	NS
30. Materials provide opportunity for each child to pleasurably participate in an independent way.	Yes	No	P	NN	NS
31. Materials allow for exploration.	Yes	No	P	NN	NS
32. Materials provide opportunity to develop eye-hand coordination and control of large muscles of the body and to use language.	Yes	No	P	NN	NS
33. Focus of materials is for child's pleasure-of-doing.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE ONE

Directions: Circle "Yes" if the following techniques are used.
Circle "No" if the techniques are not used.
Circle "P" (Partially) if techniques are used but are not used consistently with all children or are not used all the time with the group.
Circle "NN" if the techniques are not needed.
Circle "NS" if the techniques are not seen.

34. Body contact and touch are used in a positive, nurturing way and are major techniques (i.e., patting, hugging, holding, touching and physical nearness).	Yes	No	P	NN	NS
35. Classroom structure is used as a major technique.	Yes	No	P	NN	NS
36. Teacher has a consistent schedule of activities to follow each day.	Yes	No	P	NN	NS
37. Expectations are "meaningful" and reflect developmental objectives.	Yes	No	P	NN	NS
38. Classroom expectations are stated positively.	Yes	No	P	NN	NS
39. To help children organize themselves, certain areas of the room are designated for certain activities.	Yes	No	P	NN	NS
40. Children are prepared for transition time from one activity to another (e.g., "Play time is almost over.").	Yes	No	P	NN	NS
41. Voice modulation and facial expression are effectively used (e.g., calm, quiet voice; animated voice and expression; emphatic, matter-of-fact voice; eye contact; nurturing tones).	Yes	No	P	NN	NS
42. Rewards and token reinforcements are avoided completely or minimized. (Circle "Yes" if rewards or tokens are not used.)	Yes	No	P	NN	NS
43. Interpersonal forms of praise and rewards are used frequently (e.g., body contact, hugging, touching, positive statements rather than negative statements).	Yes	No	P	NN	NS
44. Teacher controls the materials during structured activity periods as needed.	Yes	No	P	NN	NS
45. Verbal interaction between lead and support teachers is used occasionally.	Yes	No	P	NN	NS
46. Two teachers are able to work together well.	Yes	No	P	NN	NS
47. Support teacher complements lead teacher, keeping children involved and redirected to the activity lead teacher is conducting.	Yes	No	P	NN	NS
48. Lead teacher is clearly leading.	Yes	No	P	NN	NS
49. Redirection (usually physical) is used frequently.	Yes	No	P	NN	NS
50. Reflection is used frequently. Teacher reflects actions of children.	Yes	No	P	NN	NS
51. Interpretation is not used. (Circle "Yes" if interpretation is not used.)	Yes	No	P	NN	NS
52. Teacher's verbal techniques are adapted to encourage each child's individual communication objectives (i.e., controlled vocabulary; simple phrases and sentences).	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE ONE
(Continued)

53. The teacher removes the child from the group to calm him or for inappropriate behavior when needed.	Yes	No	P	NN	NS
54. Time away from the group is very short.	Yes	No	P	NN	NS
55. The teacher does not use removal from the room as a technique. (Circle "Yes" if removal from the room is *not* used.)	Yes	No	P	NN	NS
56. Physical intervention is used in a positive, nurturing way and is a major technique (i.e., bodily moving a child through an act; holding a child to keep him with the group; physically moving his arm and hand in response to material when needed).	Yes	No	P	NN	NS
57. Physical intervention is accompanied by a specific word or simple statement related to activity (e.g., "We pick up toys at the end of play time," as teacher moves the child through the activity).	Yes	No	P	NN	NS
58. When physical intervention is used, teacher holds child firmly but gently and supportively.	Yes	No	P	NN	NS
59. Teacher's voice generally expresses a warm, comforting tone.	Yes	No	P	NN	NS

Check One of the Following:

Pre _____

Post _____

Reliability _____

Other _____

DEVELOPMENTAL THERAPY
RATING INVENTORY OF TEACHER SKILLS
DT/RITS

STAGE TWO

Lead Teacher: _____

Support Teacher: _____

Others Working on Team: _____

_____

Children: (first names only)

_____

_____

Length of Observation:

Full Time - Beginning: _____ Ending: _____

or

Partial Time - Beginning: _____ Ending: _____

If partial, list activities observed.

_____

_____

Rater: _____

Date: _____

Agency: _____

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STAGE TWO

ACTIVITIES AND SCHEDULES FOR STAGE TWO

Directions: Circle "Yes" if the following activities and schedules are used.
Circle "No" if the activities and schedules are not used.
Circle "P" (Partially) if the activities and schedules are used but are not used consistently with all children or are not used all the time with the group.
Circle "NN" if the activities or schedules are not needed.
Circle "NS" if the activities or schedules are not seen.

1. Activities are conducted to encourage the participation of each child in the group.	Yes	No	P	NN	NS
2. Activities provide success and promote pleasure-producing responses from the children.	Yes	No	P	NN	NS
3. Activities such as games are designed so that there are no losers and no peer competition.	Yes	No	P	NN	NS
4. Teacher avoids materials which require long waits for a turn and preferably selects materials which do not require turns.	Yes	No	P	NN	NS
5. Inside play is included.	Yes	No	P	NN	NS
6. Play time provides opportunity for communication (receptive and expressive).	Yes	No	P	NN	NS
7. Play time equipment provides opportunity for independent feedback.	Yes	No	P	NN	NS
8. Story time is included.	Yes	No	P	NN	NS
9. Story time provides opportunity for communication (receptive and expressive).	Yes	No	P	NN	NS
10. Story time provides opportunity for nurturance with children.	Yes	No	P	NN	NS
11. Snack time is included.	Yes	No	P	NN	NS
12. Snack time provides opportunity to stimulate communication and socialization skills.	Yes	No	P	NN	NS
13. Snack time is designed to be motivating and pleasurable.	Yes	No	P	NN	NS
14. Preacademic work time is included.	Yes	No	P	NN	NS
15. Work time tasks include activities planned to focus on children's specific academic objectives.	Yes	No	P	NN	NS
16. Some activities involve simple role-playing and use of make-believe.	Yes	No	P	NN	NS
17. Activities are included such as art, music, and play which provide the opportunity to work on the overall goals for the stage.	Yes	No	P	NN	NS

ACTIVITIES AND SCHEDULES FOR STAGE TWO
(Continued)

18. Opportunities are provided for each child to produce newly learned responses on his own.	Yes	No	P	NN	NS
19. Average activity time is 10-15 minutes.	Yes	No	P	NN	NS
20. Activities requiring physical movement are interspersed with those which are less active.	Yes	No	P	NN	NS
21. Teacher has an alternate activity or "back up" planned to substitute for an unsatisfactory activity.	Yes	No	P	NN	NS
22. Activity does not extend beyond "Peak" of motivation. (Circle "Yes" if activity does not extend beyond peak.)	Yes	No	P	NN	NS
23. Before activity begins, teacher "talks through" or demonstrates the activity, when necessary, so each child will understand the task.	Yes	No	P	NN	NS

MATERIALS FOR STAGE TWO

Directions: Circle "Yes" if the following criteria are used in selecting materials.
Circle "No" if the criteria are not used.
Circle "P" (Partially) if the criteria for selecting materials are used but are not used consistently for all children or are not used all the time with the group.
Circle "NN" if the materials are not needed.
Circle "NS" if the materials are not seen.

24. Classroom materials are used for a specific purpose and are chosen as vehicles for the accomplishment of objectives.	Yes	No	P	NN	NS
25. Content of the materials is semiconcrete; exploratory.	Yes	No	P	NN	NS
26. Materials are adapted from regular preschool or primary grade materials as needed.	Yes	No	P	NN	NS
27. Materials are used to stimulate individual skills and successes.	Yes	No	P	NN	NS
28. Teacher assists child in control of materials.	Yes	No	P	NN	NS
29. Materials provide opportunity for each child to successfully participate.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE TWO

Directions: Circle "Yes" if the following techniques are used.
Circle "No" if the techniques are not used.
Circle "P" (Partially) if techniques are used but are not used consistently with all children or are not used all the time with the group.
Circle "NN" if techniques are not needed.
Circle "NS" if techniques are not seen.

30. Body contact and touch are used frequently as needed. (Touch is used to a greater extent than direct body contact.)	Yes	No	P	NN	NS
31. Classroom structure is used as a major technique.	Yes	No	P	NN	NS
32. Children know the behaviors expected in each activity.	Yes	No	P	NN	NS
33. Teacher has a consistent schedule of activities to follow each day.	Yes	No	P	NN	NS
34. A schedule of activities is posted in order for the children to anticipate the activities and know the routine.	Yes	No	P	NN	NS
35. Expectations are "meaningful" and reflect developmental objectives.	Yes	No	P	NN	NS
36. Classroom rules are few and are stated positively.	Yes	No	P	NN	NS
37. Classroom expectations focus on helping children be successful.	Yes	No	P	NN	NS
38. Classroom structure is consistent but not static.	Yes	No	P	NN	NS
39. To help children organize themselves, certain areas of the room are designated for certain activities.	Yes	No	P	NN	NS
40. Children are prepared for transition time from one activity to another (e.g., "Play time is almost over.").	Yes	No	P	NN	NS
41. Voice modulation and facial expression are effectively used (e.g., calm, quiet voice; animated voice and expression; emphatic, matter-of-fact voice; eye contact).	Yes	No	P	NN	NS
42. Each child is frequently contacted by the lead teacher (either through verbal or non-verbal techniques).	Yes	No	P	NN	NS
43. Control of materials is used frequently.	Yes	No	P	NN	NS
44. Teacher allows opportunities for children to freely explore materials.	Yes	No	P	NN	NS
45. Rewards and token reinforcements are avoided completely or minimized. (Circle "Yes" if rewards or tokens are not used.)	Yes	No	P	NN	NS
46. Interpersonal forms of praise and rewards are used frequently (abundant verbal praise accompanied by physical contact).	Yes	No	P	NN	NS
47. Process of doing is reward.	Yes	No	P	NN	NS
48. Teacher uses praise and positive statements rather than negative statements.	Yes	No	P	NN	NS
49. Punishment is not used. (Circle "Yes" if punishment is not used.)	Yes	No	P	NN	NS
50. Small accomplishments are recognized.	Yes	No	P	NN	NS
51. Teacher conveys personal recognition of child as an important individual.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE TWO
(Continued)

52. Verbal interaction between lead and support teachers is used as a major technique.	Yes	No	P	NN	NS
53. Two teachers are able to work together well.	Yes	No	P	NN	NS
54. Support teacher is a "response model" encouraging children to participate in an activity.	Yes	No	P	NN	NS
55. Lead teacher is clearly leading.	Yes	No	P	NN	NS
56. Redirection is used as a major technique. (Physical redirection is combined with verbal redirection to help child respond to verbal cues when needed.)	Yes	No	P	NN	NS
57. Reflection is used frequently to put simple experiences into words.	Yes	No	P	NN	NS
58. Interpretation is used only occasionally (when appropriate).	Yes	No	P	NN	NS
59. Teacher's verbal techniques are adapted to encourage each child's individual communication objectives (i.e., controlled vocabulary; simple phrases and sentences).	Yes	No	P	NN	NS
Teacher uses the following techniques to insure participation:					
60. Teacher uses redirection or statements rather than questions.	Yes	No	P	NN	NS
61. Teacher does not ignore a child's behavior when the child is in "crisis" and is in need of teacher support. (Circle "Yes" if teacher *does not* ignore child in crisis.)	Yes	No	P	NN	NS
62. Teacher depersonalizes the issues to reduce a child's defensiveness.	Yes	No	P	NN	NS
63. Removal from the group but remaining in room is used when needed.	Yes	No	P	NN	NS
64. Teacher stays with the child when he is away from the group.	Yes	No	P	NN	NS
65. Time away from the group is as brief as possible.	Yes	No	P	NN	NS
66. Teacher structures the removal so that the child understands why he was removed.	Yes	No	P	NN	NS
67. The interpersonal exchange between the child and the teacher is constructive and ends on a positive note.	Yes	No	P	NN	NS
68. Removal from the room is used occasionally when needed.	Yes	No	P	NN	NS
69. Support teacher removes child from the room.	Yes	No	P	NN	NS
70. Child is removed because he is out of control and may harm himself or others or a topic is so private that a child cannot discuss it in front of the group. (Circle "Yes" if the teacher removes the child for appropriate reasons.)	Yes	No	P	NN	NS
71. Teacher stays with the child when he is out of the room.	Yes	No	P	NN	NS
72. Time away from the group is as brief as possible.	Yes	No	P	NN	NS
73. Teacher structures the removal so that the child understands why he was removed.	Yes	No	P	NN	NS
74. The interpersonal exchange between the child and the teacher is constructive and ends on a positive note. (Child returns to group and participates.)	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE TWO
(Continued)

75. Physical intervention is used frequently.	Yes	No	P	NN	NS
76. When physical intervention is used, teacher holds child firmly but gently and supportively.	Yes	No	P	NN	NS
77. Teacher uses calm, quiet voice to reflect feelings and to reassure the child.	Yes	No	P	NN	NS
78. Teacher allows child to be verbally aggressive by ignoring his remarks and redirecting to a constructive topic or activity.	Yes	No	P	NN	NS
79. Teacher terminates holding when child indicates self control.	Yes	No	P	NN	NS
80. Teacher uses reflection to provide simple descriptive statements of the central issue.	Yes	No	P	NN	NS
81. Teacher sets up minimal expectations or responses which child must make in order for him to return to the group.	Yes	No	P	NN	NS
82. Teacher structures situation so it will end positively.	Yes	No	P	NN	NS
83. Life Space Interviewing (LSI) is not used unless it is appropriate for a particular child. (Circle "Yes" if LSI is used appropriately.)	Yes	No	P	NN	NS

Check One of the Following:

Pre _____

Post _____

Reliability _____

Other _____

DEVELOPMENTAL THERAPY
RATING INVENTORY OF TEACHER SKILLS
DT/RITS

STAGE THREE

Lead Teacher: _____

Support Teacher: _____

Others Working on Team: _____

_____

Children: (first names only)

_____

_____

Length of Observation:

Full Time - Beginning: _____ Ending: _____

or

Partial Time - Beginning: _____ Ending: _____

If partial, list activities observed.

_____

_____

Rater: _____

Date: _____

Agency: _____

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STAGE THREE

ACTIVITIES AND SCHEDULES FOR STAGE THREE

Directions: Circle "Yes" if the following activities and schedules are used.
Circle "No" if the activities and schedules are not used.
Circle "P" (Partially) if the activities and schedules are used but are not used consistently with all students or are not used all the time with the group.
Circle "NN" if the activities and schedules are not needed.
Circle "NS" if the activities and schedules are not seen.

1. Activities are conducted to encourage the participation of each student in the group.	Yes	No	P	NN	NS
2. Activities provide success and promote pleasure-producing responses from the students.	Yes	No	P	NN	NS
3. Activities such as games are designed so that there are no losers and no peer competition.	Yes	No	P	NN	NS
4. Teacher selects materials that require students to wait for *short* time periods for their turns.	Yes	No	P	NN	NS
5. Academic work time is included.	Yes	No	P	NN	NS
6. Work time tasks include activities planned to focus on students' specific academic objectives.	Yes	No	P	NN	NS
7. Group project or game time is included.	Yes	No	P	NN	NS
8. Activity provides opportunity to develop skills in socialization and communication.	Yes	No	P	NN	NS
9. Snack time is included.	Yes	No	P	NN	NS
10. Snack time provides opportunity to stimulate communication and socialization skills.	Yes	No	P	NN	NS
11. Activities are included such as art, music, and play which provide the opportunity to work on the overall goals for the stage.	Yes	No	P	NN	NS
12. Each student has opportunities for successful participation.	Yes	No	P	NN	NS
13. Activities requiring physical movement are interspersed with those which are less active.	Yes	No	P	NN	NS
14. Teacher has an alternate activity or "back up" planned to substitute for an unsatisfactory activity.	Yes	No	P	NN	NS
15. Activity does not extend beyond "Peak" of motivation. (Circle "Yes" if activity does not extend beyond peak.)	Yes	No	P	NN	NS
16. Before activity begins, teacher "talks through" or demonstrates the activity, when necessary, so each student will understand the task.	Yes	No	P	NN	NS

MATERIALS FOR STAGE THREE

Directions: Circle "Yes" if the following criteria are used in selecting materials.
Circle "No" if the criteria are not used.
Circle "P" (Partially) if the criteria for selecting materials are used but are not used consistently for all students or are not used all the time with the group.
Circle "NN" if the materials are not needed.
Circle "NS" if the materials are not seen.

17. Classroom materials are used for a specific purpose and are chosen as vehicles for the accomplishment of objectives.	Yes	No	P	NN	NS
18. Content of the materials is semiabstract.	Yes	No	P	NN	NS
19. Materials are regular school materials adapted if needed.	Yes	No	P	NN	NS
20. Materials are used to stimulate individual skills for success in the group.	Yes	No	P	NN	NS
21. Group is allowed to control the materials with teacher assistance.	Yes	No	P	NN	NS
22. Teacher selects materials which have opportunities for both small successes and small failures.	Yes	No	P	NN	NS
23. Materials emphasize group processes and are motivating.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE THREE

Directions: Circle "Yes" if the following techniques are used.
Circle "No" if the techniques are not used.
Circle "P" (Partially) if techniques are used but are not used consistently with all students or are not used all the time with the group.
Circle "NN" if techniques are not needed.
Circle "NS" if techniques are not seen.

24. Body contact is used occasionally as needed (physical closeness or touch).	Yes	No	P	NN	NS
25. Classroom structure and rules are used frequently.	Yes	No	P	NN	NS
26. Students know the behaviors expected in each activity.	Yes	No	P	NN	NS
27. Teacher has a consistent schedule of activities to follow each day.	Yes	No	P	NN	NS
28. A schedule of activities is posted in order for students to anticipate the activities and know the routine.	Yes	No	P	NN	NS
29. Expectations are "meaningful" and reflect developmental objectives.	Yes	No	P	NN	NS
30. Classroom rules are few and are stated positively.	Yes	No	P	NN	NS
31. Classroom rules focus on helping students be successful.	Yes	No	P	NN	NS
32. Consequences for breaking rules are stated constructively and provide for constructive solutions.	Yes	No	P	NN	NS
33. Classroom structure is consistent but not static.	Yes	No	P	NN	NS
34. To help students organize themselves, certain areas of the room are designated for certain activities.	Yes	No	P	NN	NS
35. Students are prepared for transition time from one activity to another (e.g., "Game time is almost over.").	Yes	No	P	NN	NS
36. Voice modulation and facial expression are effectively used (e.g., calm, quiet voice; animated voice and expression; emphatic, matter-of-fact voice; eye contact).	Yes	No	P	NN	NS
37. Each student is frequently contacted by the lead teacher (either through verbal or non-verbal techniques).	Yes	No	P	NN	NS
38. Control of materials by teacher is used to calm a group or prevent a student from acting out.	Yes	No	P	NN	NS
39. Rewards and token reinforcements are avoided completely or minimized. (Circle "Yes" if rewards or tokens are not used.)	Yes	No	P	NN	NS
40. Interpersonal forms of praise and rewards are used frequently (verbal praise and group activities).	Yes	No	P	NN	NS
41. Teacher uses praise and positive statements rather than negative statements.	Yes	No	P	NN	NS
42. Punishment is not used. (Circle "Yes" if punishment is not used.)	Yes	No	P	NN	NS
43. Small accomplishments are recognized.	Yes	No	P	NN	NS
44. Teacher conveys personal recognition of student as an important individual.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE THREE
(Continued)

45. Verbal interaction between lead and support teachers is used as a major technique.	Yes	No	P	NN	NS
46. Two teachers are able to work together well.	Yes	No	P	NN	NS
47. The lead and support teachers use verbal exchanges to provide models for interpersonal responses.	Yes	No	P	NN	NS
48. Lead teacher is clearly leading.	Yes	No	P	NN	NS
49. Redirection is used as a major technique. (Mainly verbal redirection; minimal physical redirection.)	Yes	No	P	NN	NS
50. Interpretation is used when appropriate and does not require a response from the student.	Yes	No	P	NN	NS
51. Confrontation is used only when there is certainty of a therapeutic outcome.	Yes	No	P	NN	NS
Teacher uses the following techniques to avoid confrontation:					
52. Teacher uses redirection or statements rather than questions.	Yes	No	P	NN	NS
53. Teacher appropriately ignores a student's behavior when the student is merely "testing" a teacher to ellicit a reaction.	Yes	No	P	NN	NS
54. Teacher does not ignore a student's behavior when the student is in "crisis" and is in need of teacher support. (Circle "Yes" if teacher *does not* ignore student in crisis.)	Yes	No	P	NN	NS
55. Teacher responds to a student's inappropriate request with a question.	Yes	No	P	NN	NS
56. Teacher depersonalizes the issues to reduce a student's defensiveness.	Yes	No	P	NN	NS
57. Teacher uses humor to neutralize the situation.	Yes	No	P	NN	NS
58. Teacher reflects on the positive qualities in a student.	Yes	No	P	NN	NS
59. Removal from the group but remaining in room is used occasionally when appropriate.	Yes	No	P	NN	NS
60. Removal from the room is used frequently when needed.	Yes	No	P	NN	NS
61. Support teacher removes student from the room.	Yes	No	P	NN	NS
62. Student is removed because he is out of control and may harm himself or others or a topic is so private that a student cannot discuss it in front of the group. (Circle "Yes" if the teacher removes the student for appropriate reasons.)	Yes	No	P	NN	NS
63. Teacher limits her talk and is swift and firm while removing the student.	Yes	No	P	NN	NS
64. Teacher stays with the student when he is out of the room.	Yes	No	P	NN	NS
65. Teacher structures the removal so that the student understands why he was removed.	Yes	No	P	NN	NS
66. The interpersonal exchange between the student and the teacher is constructive and ends on a positive note. (Student returns to group and participates.)	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE THREE
(Continued)

67. Physical intervention is used occasionally.	Yes	No	P	NN	NS
68. When physical intervention is used, teacher holds student firmly but gently and supportively.	Yes	No	P	NN	NS
69. Teacher uses calm, quiet voice to reflect feelings and to reassure the student.	Yes	No	P	NN	NS
70. Teacher verbalizes to student that she is holding him to help him gain control.	Yes	No	P	NN	NS
71. Teacher allows student to be verbally aggressive by ignoring his remarks and redirecting to a constructive topic.	Yes	No	P	NN	NS
72. Teacher gives verbal cues to student as to what is expected of him before terminating physical holding.	Yes	No	P	NN	NS
73. Teacher terminates holding when student indicates self control.	Yes	No	P	NN	NS
74. Teacher limits her talk and is positive.	Yes	No	P	NN	NS
75. Teacher structures situation so it will end positively.	Yes	No	P	NN	NS
76. Life Space Interviewing (LSI) is used as a major technique with individual students.	Yes	No	P	NN	NS
77. Reflection is used to "ready" a student for the LSI.	Yes	No	P	NN	NS
78. When the student's physiological processes are restored (breathing, muscle tone), the teacher obtains the student's perception of the situation.	Yes	No	P	NN	NS
79. If the student is having difficulty talking, teacher reflects what was observed or interprets feelings behind behavior.	Yes	No	P	NN	NS
80. Teacher finds out what is important to the student.	Yes	No	P	NN	NS
81. Teacher uses what the student has given and puts it together in a reality context around central issue, using reflection and interpretation.	Yes	No	P	NN	NS
82. Teacher is not judgmental.	Yes	No	P	NN	NS
83. If the student is ready to consider changing his responses, teacher discusses with the student alternative ways to respond to situation.	Yes	No	P	NN	NS
84. Teacher helps the student select alternate response which he can successfully accomplish.	Yes	No	P	NN	NS

Check One of the Following:

Pre _____

Post _____

Reliability _____

Other _____

DEVELOPMENTAL THERAPY
RATING INVENTORY OF TEACHER SKILLS
DT/RITS

STAGE FOUR

Lead Teacher: _____

Support Teacher: _____

Others Working on Team: _____

_____

Children: (first names only)

_____

_____

Length of Observation:

Full Time - Beginning: _____ Ending: _____

or

Partial Time - Beginning: _____ Ending: _____

If partial, list activities observed.

_____

_____

Rater: _____

Date: _____

Agency: _____

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STAGE FOUR

ACTIVITIES AND SCHEDULES FOR STAGE FOUR

Directions: Circle "Yes" if the following activities and schedules are used.
Circle "No" if the activities and schedules are not used.
Circle "P" (Partially) if the activities and schedules are used but are not used consistently with all students or are not used all the time with the group.
Circle "NN" if the activities and schedules are not needed.
Circle "NS" if the activities and schedules are not seen.

1. Activities are conducted to encourage the participation of each student in the group.	Yes	No	P	NN	NS
2. Activities provide success and promote pleasure-producing responses from the students.	Yes	No	P	NN	NS
3. Academic work time is included.	Yes	No	P	NN	NS
4. Work time tasks include activities planned to focus on students' specific academic objectives.	Yes	No	P	NN	NS
5. Some academic work is conducted in groups.	Yes	No	P	NN	NS
6. Academic activities include content of specific interest to the students.	Yes	No	P	NN	NS
7. Group project or game time is included.	Yes	No	P	NN	NS
8. Socialization and communication are emphasized during group times.	Yes	No	P	NN	NS
9. Snack time is included.	Yes	No	P	NN	NS
10. Communication and socialization are emphasized during snack time.	Yes	No	P	NN	NS
11. Unstructured activities are included which provide opportunities to "try out" newly learned responses independently and successfully (e.g., games, projects, and outside play).	Yes	No	P	NN	NS
12. The daily schedule is consistent and provides for group meetings at the beginning and ending of the day.	Yes	No	P	NN	NS
13. Group planning and feedback are a part of every activity.	Yes	No	P	NN	NS
14. Teacher permits deviation from the schedule when appropriate.	Yes	No	P	NN	NS
15. Students contribute ideas for the selection of activities.	Yes	No	P	NN	NS
16. Teacher has an alternate activity or "back up" planned to substitute for an unsatisfactory activity.	Yes	No	P	NN	NS
17. Activity does not extend beyond "Peak" of motivation. (Circle "Yes" if activity does not extend beyond peak.)	Yes	No	P	NN	NS
18. Before activity begins, teacher "talks through" or demonstrates the activity, when necessary, so each student will understand the task.	Yes	No	P	NN	NS

MATERIALS FOR STAGE FOUR

Directions: Circle "Yes" if the following criteria are used in selecting materials.
Circle "No" if the criteria are not used.
Circle "P" (Partially) if the criteria for selecting materials are used but are not used consistently for all students or are not used all the time with the group.
Circle "NN" if the materials are not needed.
Circle "NS" if the materials are not seen.

19. Classroom materials are used for a specific purpose and are chosen as vehicles for the accomplishment of objectives.	Yes	No	P	NN	NS
20. Content of the materials is abstract, symbolic, and complex.	Yes	No	P	NN	NS
21. Materials reflect real-life interests of students.	Yes	No	P	NN	NS
22. Materials are used to stimulate group processes.	Yes	No	P	NN	NS
23. Students have considerable responsibility for control of materials.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE FOUR

Directions: Circle "Yes" if the following techniques are used.
Circle "No" if the techniques are not used.
Circle "P" (Partially) if techniques are used but are not used consistently with all students or are not used all the time with the group.
Circle "NN" if techniques are not needed.
Circle "NS" if techniques are not seen.

24. Body contact is used, as needed.	Yes	No	P	NN	NS
25. Classroom structure is used frequently.	Yes	No	P	NN	NS
26. Classroom rules are few and are stated positively.	Yes	No	P	NN	NS
27. Teacher encourages group members to develop or modify rules and procedures as needed.	Yes	No	P	NN	NS
28. Reflection of established procedures and/or expectations is used to provide students with behavioral guidelines.	Yes	No	P	NN	NS
29. Consequences of breaking rules are stated constructively and provide for constructive solutions. (Punishment is not used.)	Yes	No	P	NN	NS
30. To help students organize themselves, certain areas of the room are designated for certain activities.	Yes	No	P	NN	NS
31. Voice modulation and facial expression are effectively used (e.g., calm, quiet voice; animated voice and expression; emphatic, matter-of-fact voice; eye contact).	Yes	No	P	NN	NS
32. Control of materials by teacher is seldom used. (Circle "Yes" if control of materials is used appropriately.)	Yes	No	P	NN	NS
33. Rewards and token reinforcements are avoided completely or minimized. (Circle "Yes" if rewards or tokens are not used.)	Yes	No	P	NN	NS
34. Teacher uses praise and positive statements rather than negative statements.	Yes	No	P	NN	NS
35. Teacher conveys personal recognition of each student as an important individual.	Yes	No	P	NN	NS
36. Praise and recognition for individual and group interactions are authentic in quality.	Yes	No	P	NN	NS
37. The adult-student relationships depict genuine respect and openness for each other.	Yes	No	P	NN	NS
38. Teachers are completely honest in their interactions with the students.	Yes	No	P	NN	NS
39. Verbal interaction between lead and support teachers is used occasionally.	Yes	No	P	NN	NS
40. Two teachers are able to work together well.	Yes	No	P	NN	NS
41. Lead teacher is clearly leading (when adult leadership is needed).	Yes	No	P	NN	NS
42. Redirection is used occasionally. (A verbal reminder is usually sufficient.)	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE FOUR
(Continued)

43. Reflection is used occasionally to help students recognize and express feelings in themselves and others.	Yes	No	P	NN	NS
44. Interpretation is used when appropriate and does not require a response from the student.	Yes	No	P	NN	NS
Teacher uses the following techniques to avoid confrontation:					
45. Teacher uses redirection or statements rather than questions.	Yes	No	P	NN	NS
46. Teacher responds to students' anger or hostility by ignoring verbally aggressive remarks, reflecting feelings, redirection, or interpretation of behavior and feelings.	Yes	No	P	NN	NS
47. Teacher does not ignore a student's behavior when the student is in "crisis" and is in need of teacher support. (Circle "Yes" if teacher *does not* ignore student in crisis.)	Yes	No	P	NN	NS
48. Teacher clarifies situation rather than giving commands.	Yes	No	P	NN	NS
49. Teacher uses humor to neutralize the situation.	Yes	No	P	NN	NS
50. Teacher reflects on the positive qualities in a student.	Yes	No	P	NN	NS
51. Removal from the group but remaining in room is rarely used.	Yes	No	P	NN	NS
52. Removal from the room is used frequently when needed. (Removal is often voluntary and centered around student's need to discuss an issue in private.)	Yes	No	P	NN	NS
53. Teacher limits her talk and is swift and firm while removing the student.	Yes	No	P	NN	NS
54. Teacher stays with the student when he is out of the room.	Yes	No	P	NN	NS
55. Teacher structures the removal so that the student understands why he was removed.	Yes	No	P	NN	NS
56. The interpersonal exchange between the student and the teacher is constructive and ends on a positive note. (Student returns to group and participates.)	Yes	No	P	NN	NS
57. Physical intervention is not used unless a student regresses. (Circle "Yes" if physical intervention is used when appropriate or otherwise is not used.)	Yes	No	P	NN	NS
58. When physical intervention is used, the student is taken to a private area as quickly as possible.	Yes	No	P	NN	NS
59. When holding a student, teacher limits own talk but conveys positive support.	Yes	No	P	NN	NS
60. When physical intervention is used, teacher structures situation so that the issue is resolved positively for the student.	Yes	No	P	NN	NS

TECHNIQUES FOR STAGE FOUR
(Continued)

61. Life Space Interviewing (LSI) is used as a major technique with individual students.	Yes	No	P	NN	NS
62. Reflection is used to "ready" a student for the LSI.	Yes	No	P	NN	NS
63. When the student's physiological processes are restored (breathing, muscle tone), the teacher obtains the student's perception of the situation.	Yes	No	P	NN	NS
64. If the student is having difficulty talking, teacher reflects what was observed or interprets feelings behind behavior.	Yes	No	P	NN	NS
65. Teacher finds out what is important to the student.	Yes	No	P	NN	NS
66. Teacher uses what the student has given and puts it together in a reality context around central issue using reflection and interpretation.	Yes	No	P	NN	NS
67. Teacher is not judgmental.	Yes	No	P	NN	NS
68. If the student is ready to consider changing his responses, teacher discusses with the student alternative ways to respond to situation.	Yes	No	P	NN	NS
69. Teacher helps the student select alternate response which he can successfully accomplish.	Yes	No	P	NN	NS
70. Life Space Interviewing (LSI) is used as a major technique with the group.	Yes	No	P	NN	NS
71. Teacher clarifies the purpose of the discussion for the group.	Yes	No	P	NN	NS
72. If the group is having difficulty talking, teacher reflects what was observed or interprets feelings behind behavior.	Yes	No	P	NN	NS
73. Teacher finds out what is important to the group.	Yes	No	P	NN	NS
74. Teacher uses what the group has given and puts it together in a reality context around central issue, using reflection and interpretation.	Yes	No	P	NN	NS
75. Teacher is not judgmental.	Yes	No	P	NN	NS
76. If the group is ready to consider changing its response, teacher discusses with the group alternative ways to respond to situation.	Yes	No	P	NN	NS
77. Teacher helps the group select alternate response which can be successfully accomplished.	Yes	No	P	NN	NS
78. The interpersonal exchange between group and teacher is constructive and ends on a positive note.	Yes	No	P	NN	NS

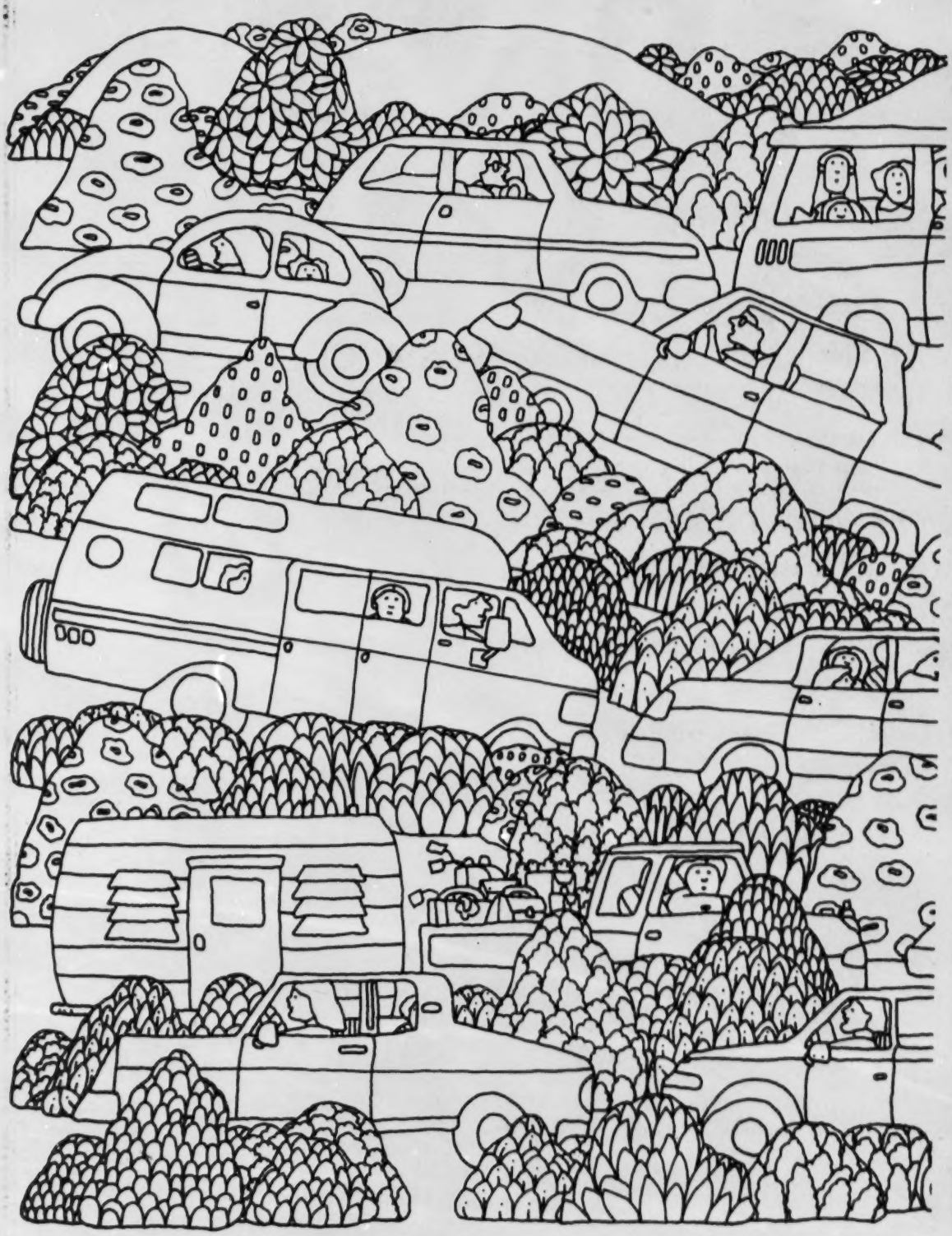
APPENDIX F

Developmental Therapy Newsletter, Spring 1982

NEWSLETTER 1982

A JOINT PUBLICATION OF
THE NATIONAL TECHNICAL ASSISTANCE OFFICE
THE RUTLAND CENTER
AND
THE DEVELOPMENTAL THERAPY INSTITUTE
THE UNIVERSITY OF GEORGIA
ATHENS, GEORGIA

DEVELOPMENTAL THERAPY INSTITUTE
ADERHOLD HALL ROOM 570
UNIVERSITY OF GEORGIA
ATHENS, GEORGIA 30602



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NEWSLETTER STAFF

Copy Editor ..... Marilyn Perkins
Production Editor ..... Geri Williams
Consulting Editor ..... Sara Williams
Production Dept. ..... Colonial Press, Inc.

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OUR GLOBAL NETWORK OF FRIENDS AND COLLEAGUES

by Mary M. Wood

In the past few years, the Developmental Therapy Institute and Rutland Center have had an increasingly international flavor — with more and more visits from educators, psychologists, counselors, professors, parents, and students from around the world.

Our tally shows our nearest neighbor, Canada, represented by professionals from Ottawa, Montreal, and Saskatchewan. A recent thesis A. Masse', *Recherche in Musecotherapie du Development,* Eale de Musique de L' Universite Laval, St. Damien, Quebec Canada, has blended principles of music therapy and Developmental Therapy — in French!

In Latin America, *Terapia de desarollo* (Developmental Therapy) has been published by Editorial Medica, Panamerica in San Paula, Brazil. From El Salvador, referral and consultation concerning an autistic youngster began when his family found *Developmental Therapy for Young Children with Autistic Characteristics.* We continue to receive requests for the Developmental Therapy Objectives Rating Form (DTORF) translated in Puerto Rico and the DTORF Workbook, *Terapia Evolutia,* translated in Peru, and a copy of *Developmental Art Therapy* has gone with missionaries to a school in Ecuador.

On the other side of the world, we remain in contact with students and teachers in Holland and Scotland who trained at the Institute. We also shared Developmental Therapy training films with a professor in Germany.

This summer, a graduate of our training program for parents of autistic students will be returning to Israel. We hope her proposed translations of the Developmental Therapy materials will be useful to parents and teachers there.

Currently, a teacher from New Zealand is finishing her year of study with us. For her thesis she is preparing, pilot-testing, and evaluating a series of original lessons which emphasize Developmental Music Therapy and the creative arts.

Visiting professors in Special Education from Japan, India, Canada, and Bulgaria provided many lively exchanges and the observations they shared broadened and enriched our perspective. As the next school year begins, we look forward to welcoming international students and faculty from Japan, Thailand, China, and Australia.

The Rotary International Scholarship Program has contributed significantly to these international exchanges.

The future looks bright for increasing our international collaborations. Perhaps Developmental Therapy demonstration teachers from Rutland Center can go abroad to help establish classes in other countries. And we will continue to provide on-site training and consultation wherever needed. Our mutual concern about the education of disturbed and autistic children underscores our belief in the universal nature of development in children.

NEWS FROM THE NATIONAL TECHNICAL ASSISTANCE OFFICE

by Karen R. Davis, Director

As the end of another year approaches, we reflect on the many accomplishments of programs this year and look at some of the prospects which lie ahead. We feel that even with the uncertainty of special education funding a year ago, programs have continued to try new avenues, arrange for training and have made this a very productive year.

Fall began with our welcoming a new staff member. Sara Williams had no sooner gotten her office arranged, than she had to pack her bags, along with several boxes, and head for the West Coast. It was decided that Sara should be initiated early into the life of the worldwide traveler — alias, Training Associate. Sara came to us with several years of experience in the Developmental Therapy model. She began as a Music Therapy intern at Rutland Center and completed the Developmental Therapy Institute during the summer of 1981. She has worked at both the Cedarwood and the Chatham-Effingham Psychoeducational Centers. Sara has done an excellent job for us with a number of sites this year.

In addition to a new staff member, we also welcomed several new sites to the growing number of Developmental Therapy replications around the country. Well on their way in this adoption process are new sites in Richland and Kennewick, Washington; Duluth, Minnesota; Rutland, Vermont; Philadelphia, Pennsylvania; Atlanta, Georgia; Orangeburg and Spartanburg, South Carolina; and just beginning this Spring are Dayton, Tennessee; Aiea, Hawaii; and Toledo, Ohio. We have enjoyed working with these programs along with those continuing from last year. The highly motivated staffs at these sites keep us pleasantly busy. The change within these programs makes our jobs interesting and exciting!

As we look ahead to the prospects of another year, our requests for services continue to grow. June should bring us some indication of resources for the coming months. As we ponder the cuts that have been made in programs, particularly in the areas of Early Childhood and Special Education, we realize that these are changing times. However, we encourage each of you as professionals, parents and interested persons to express your opinions about these changes to your representatives in Congress. This Spring, proposed changes in P.L. 94-142 have been drafted and are due to be published in the Federal Register in May. These changes will affect programs for children. Be sure that you take this opportunity to express your views on the services to be offered to handicapped children.

We are hoping for another exciting year ahead. Keep in touch with us — LET US KNOW WHAT **YOU** ARE DOING!

NEED DEVELOPMENTAL THERAPIST
WITH SPECIAL EDUCATION CERTIFICATION
(include art or music therapy)
to work at:

CHILDREN'S HOSPITAL
Utica, New York

Contact
Ms. Gene Sexton
Program Coordinator
1675 Bennett St.
Utica, New York 13502

AN OUNCE OF PREVENTION...

by Janet Ray
Preschool Enrichment Program
Winston-Salem, North Carolina

Problem: Services are not available in this community for preschool children who are at risk for developing emotional problems. Only limited services are available for preschool children who are already experiencing emotional or developmental difficulties.

Hypothesis: If assistance were provided to the adults most influential in a preschool child's life, parents and teachers, these adults could encourage the child's healthy social-emotional development and minimize the risk of emotional handicaps occurring.

Solution: The Preschool Enrichment Program (PEP) in Winston-Salem, N.C.

The Preschool Enrichment Program, which is affiliated with the local Mental Health Center, began in 1981 with *prevention* as its goal. PEP's goal is to foster healthy social-emotional development in the preschool child and thereby prevent such difficulties from impairing the child's functioning in later years. Although PEP works to impact on the preschool child, its target population is not just the child but rather the adults who most influence the child, parents and teachers. Since the number of therapists necessary to reach every preschool child at risk are far greater than the number available, PEP works with a staff of five to help adults already involved with the preschooler develop the necessary skills and knowledge to become the primary successful interveners for these children. In this way, difficulties can be remediated before they lead to complex and serious problems, costly to treat and with poor prognosis.

Developmental Therapy is the model chosen by the PEP staff for use in all three components of the program; consultation, education, and the demonstration preschool classroom. Developmental Therapy is applicable in all areas because of its positive growth oriented approach to children.

The consultation component of PEP provides direct service to day care, preschool, and kindergarten teachers who request help with children they perceive as having social or emotional difficulties. PEP staff members use the DTORF* to help the teacher assess the child's developmental level and plan appropriate strategies for the classroom. The teachers use the DTORF and management plan with the parents so that they can also participate in its implementation. Depending on the nature of the referral, the PEP consultant may observe and debrief on several occasions with the teacher; work in the classroom to model management techniques; or lead activities in the class to demonstrate the use of materials and activities.

While consultation is generally focused on a particular child, PEP's ultimate goal is to encourage teachers to make the classroom environment more condusive to all children for their healthy development. Often techniques which are implemented for the benefit of one identified child generalize to the benefit of the entire class. Already, in the first year of PEP's operation, the consultation process has been instrumental in preventing the exclusion of many preschool children from the regular school setting. PEP offers training to day-care and preschool faculties, as well as parent groups on a variety of topics dealing with child development, Developmental Therapy curriculum, and parenting issues. This past fall, PEP offered a course to day-care faculties on a subscription basis in conjunction with a local resource center. In-service education and workshops provide opportunities for more adults to be exposed to information helpful in encouraging the healthy social-emotional development of their children.

In addition to the consultation and education services to adults, a demonstration preschool classroom is in operation at the Mental Health Center. The purpose of the classroom is two-fold: First, to serve as an observation and training tool for teachers, students, and parents; and secondly, to serve as a model Developmental Therapy classroom for meeting the needs of each child. The class provides a mainstream setting for its population of five stable children and five children with behavioral or emotional problems. The children are served by a full-time lead and support teacher with extra coverage by a part-time teacher. The demonstration classroom is a licensed and certified North Carolina day-care center.

The observation room adjacent to the classroom stays as busy as the children in the class. Visiting teachers, students and interns observe the Developmental Therapy curriculum in operation, often studying particular techniques or strategies that are the focus of PEP consultation. Parents of the students enrolled in PEP observe the growth of their child and these observations and teacher contacts provide continuity between the children's school and home.

During the summer, PEP operates a "Get Ready for School" group for children who will enroll in public school in the fall and their parents. During the four-week session, the work with the children focuses on providing appropriate school behavior and social skills. The parents meet concurrently in a parent education class to prepare themselves to help their child make a positive school adjustment. Structured class observations serve as an important part of the parent education class.

In the current atmosphere of financial austerity and limited fiscal resources, prevention should be a major concern. The Preschool Enrichment Program meets that concern in a positive and constructive manner. Rather than attempting to provide direct service to all children at risk for emotional problems, PEP provides consultation and education to those who most influence the lives of youngsters. Consequently, little problems are solved at age four before they become complex and costly problems at age fourteen.

An ounce of prevention IS worth a pound of cure.

* Developmental Therapy Objective Rating Form

COLLABORATION WITH OTHER COLLEGES AND UNIVERSITIES

by Carolyn Combs

Faculty in the area of the severely emotionally disturbed have been telling us that there is a need periodically to "get out in the trenches" to see what is happening and to refresh their skills in working directly with emotionally disturbed students and their teachers. As a result, a workshop for college and university faculty was held at the University of Georgia through the Center for Continuing Education on May 23-25, 1982.

This workshop was our project's initial attempt to open up discussions with faculty regarding our mutual concerns and interests. We felt that the outcomes were beneficial to all of us who participated from the Developmental Therapy Institute, and we plan to continue such workshops with individuals and groups from other colleges and universities in the future.

The workshop focused on identifying and seeking solutions to real-life problems in the classroom and the related problems of training personnel in field-based placements. A full day was spent observing classes at Rutland Center and talking with the teachers. Discussions also dealt with problems in supervision of trainees. Participants shared information about their individual teacher training programs and were able to gain support and ideas from one another.

Our three-year project was originally conceived to bring current, successful field practices into university and college curricula. We intend to continue to expand our efforts to assist college and university faculty in providing preservice training to students preparing to work with the seriously emotionally disturbed, including the autistic. If you are interested in this project, let us hear from you.

Write:

C. Combs
A. Gunn
Aderhold-Division of Exceptional Children
University of Georgia
Athens, Georgia 30602

DETROIT BAPTIST CHILDREN'S HOME

4410 West Thirteen Mile Road • Royal Oak, Michigan 48072 • (313) 549-4339

by Phillip L. Cole, ACSW
Director of Treatment

This past year has seen many changes at Detroit Baptist Children's Home. The largest of those changes was moving the boys from a large old institutional building to two separate ten bed cottages. We also added a 10 bed girls' cottage to our program. These major changes in physical environment and population required restructuring and organizing our milieu to meet the new demands. We, therefore, made a decision to utilize only general elements of Developmental Therapy until the new milieu became stable. It was felt that a stable program base was required before the more refined elements of Developmental Therapy could be meaningfully integrated. To provide the "stable base," we consulted with Group Child Care Consultant Services at the University of North Carolina. As a result of that consultation, we now have the clarity and stability of program that will allow further refinement using Developmental Therapy concepts.

Another way of looking at what we have done is to consider our "stable base" as #5 of the 13 basic Developmental Therapy interventions, "Classroom Structure and Rules." We have trained our staff in the other 12 interventions as well, focusing most intensively on Life Space Interviewing. Also, the five basic assumptions and the concept of lead and support roles have been successfully integrated into our program.

We have found the Developmental Therapy training materials to be excellent and the staff response most gratifying. As I had indicated in my term paper for last summer's institute, there are many similarities between Developmental Therapy and Detroit Baptist Children's Home. The most helpful aspect of Developmental Therapy is that it defines most of what we do in residential care and allows those things to be taught and refined as specific skills.

We will continue to work on general concepts of Developmental Therapy until the end of the year. At that time we plan to focus on developmental stages. Having only four hours per month of In-Service Training Time, I feel we are moving ahead at a reasonable rate.

As an incentive to all of us, we have received a grant from the Michigan Council of the Arts to provide a growth experience using movement and drama. This program has been designed using more of the Developmental Therapy principles. We have four groups based on DTORF stages rather than residential units. The roles of lead and support are much more specific. These groups started in February. They meet one hour twice weekly in both movement and drama. We will complete DTORF's in June and expand the program during the summer.

In summary, we have found the information I brought back from the summer institute to be valuable and relevant to residential treatment. The Developmental Therapy model is on our horizon as a long range objective as well as providing guideposts for our growth in the short term.

TRAINING PROGRAM FOR TEACHERS OF AUTISTIC CHILDREN

by Andrea Gunn

The Developmental Therapy Institute has responded to a critical national shortage of qualified teachers of the autistic by developing a training sequence to prepare teachers to work with autistic children and their families. A three year federal grant has been awarded tc support this training effort.

A priority in planning was to develop a program which would foster the autistic child's ability to operate in the least restrictive educational and social environment. Cognizant of the great individual differences which exist in the autistic population, it was apparent that the most suitable and least restrictive placement for the autistic child may not always be a classroom with other autistic children. Appropriate and innovative placement possibilities for an autistic child depend on the child's individual characteristics and might include classes with TMR, EMR, LD, BD students, speech and language classes, regular classrooms, recreation settings and vocational education, as well as classes for the autistic.

These more innovative approaches to service delivery with autistic children only become viable if teachers in these various areas of education have the skills necessary to work with autistic children. Obviously, an interdisciplinary approach to teacher preparation would have to be incorporated in the training program design. The fruits of the planning efforts will come to bare in fall quarter of 1982 when the Division of Exceptional Children at the University of Georgia in Athens will begin offering an elective three quarter course sequence in the education of the autistic to majors in Mental Retardation, Speech and Hearing, Learning Disabilities and Emotional Disturbances. Students with an interest in autism may take the entire three course sequence while majoring in their designated field with an "add-on" specialty in autism.

The course sequence is designed to offer both theoretical and practical exposure to the use of Developmental Therapy with autistic children and their families. The three course sequence is as follows:

1. **Education of Autistic Children and Youth** (5 quarter credit hours) Understanding the wide range of special characteristics of autistic children and their import in planning, implementing and evaluating educational programs for the autistic. Emphasizes developmentally appropriate curriculum and management strategies, integral parent involvement, multiple learning environments, coordination of community services in an integrated effort leading toward normalization of the autistic child in the least restrictive setting. Included in this course will be practical experience with autistic children.

2. **Working with Families of the Autistic** (5 quarter credit hours) Understanding the special needs of families of autistic children. Focus on parent/teacher collaboration in developing family programs which support the child and family in the community, home, and school. Specific emphasis on effective home management strategies, support and community services available to the family, and family activities in the community which aid in normalization. Included in this course will be practical experience in working with the families of autistic children.

3. **Internship** (5 quarter credit hours) An internship offering practical experience in working with autistic children. Internship sites include Georgia Psychoeducational Centers, residential group home placements, and recreational camping settings.

TECHNOLOGY AND DEVELOPMENTAL THERAPY

by Mary M. Wood

Inescapably, the technological age is upon us. Yet for those of us who put successful human relations as our top priority, the challenge to embrace machines can pose a dilemma. After a period of turning my back on technology, I see now the potential for enhancing the skills of a teacher/therapist using computer aided instruction.

At the Institute we are working on a computer simulation for conducting a Developmental Therapy class, using a "critical incident" approach. The hypothetical class is composed of five severely disturbed and/or autistic students at several stages of development, complete with case records, DTORFs, and IEPs. A teacher/therapist learning to use Developmental Therapy can conduct the class via the computer, i.e., each day is simulated with one-crisis-after-another (big and small). We know that for every critical incident there are numbers of ways to respond. Some responses are more effective than others. Some responses come too late; others may tend to inflame a situation rather than resolve it constructively. We are attempting to put "effectiveness weightings" on each possible response so that the children in the class will progress (or not) on their DTORFs, depending upon the way the teacher/therapist conducts the class.

Would you like to collaborate with us? We welcome your "critical incident" — a 2 or 3 sentence vignette describing a situation which requires a teacher response (verbal or otherwise). Mail them to us at the Institute. Solutions are not necessary.

We also will be seeking certified Developmental Therapy teacher/therapists in various sections of the country to help us de-bug the program by using it and giving us evaluative feedback. The first field review should be underway in the spring and summer of 1983. Let us know if you are interested!

"FULL PARTICIPATION WITH EQUALITY"

by Mira Chowdhry
India

India's present population is about 680 million, among which 70% live in villages. The rate of illiteracy is high although our Constitution compels for Universalization of Education. There are 32 states and union territories, 14 official languages and 6 major religions. We are unique, conservative in our beliefs and social system.

The slogan "Full Participation With Equality" has its own magnitude for those who believe in it, and I am no exception. I am a lecturer in education in the National Council of Educational Research and Training (NCERT) in New Delhi, India. NCERT is an autonomous body registered under the Societies Registration Act (Act XXI of 1860). It works for upgrading the quality of school education in the country and assists and advises the Ministry of Education and Social Welfare in the implementation of its policies and major programs in the field of education through the National Institute of Education (NIE) at New Delhi, which has 27 departments (units) cells and groups; the four Regional Colleges of Education (RCEs) located at Ajmer, Bhopal, Bhubaneswar and Mysore; the Center for Educational Technology (CET) in New Delhi and 18 Field Advisers Offices in different parts of the country for liaison with the States.

To bring radical change is a hard nut to crack but I am not disheartened. Where there is a will there is a way, especially through NCERT resources. A lot can be done, such as:

(i) to make the community aware of the problems of handicaps and ways to make the handicapped useful members of society.
(ii) parent education, acceptance of handicapped children, mothers' involvement in programs for handicaps.
(iii) publicity of "Full Participation With Equality" through mass communication and mass media.
(iv) early diagnosis through proper screening systems in pre-primary schools and measures for prevention.
(v) integrated education (mainstreaming) making the maximum and appropriate use of available resources.

(vi) making special education a compulsory subject in teacher training institutes.
(vii) in-service training of teachers in all levels of teaching.
(viii) preparation of inexpensive educational kits for handicaps.

My humble contribution to accomplishing these ideals can be through the programs of NCERT which I co-ordinate in my unit assisting other departments in accomplishing the above mentioned programs. In NCERT we work in collaboration with other departments which gives each expert a chance to get work satisfaction in her/his field of specialization.

How I ended up at the University of Georgia studying at the Developmental Therapy Institute this past year, began many years ago. Honest confession is good for mental health and I think before proceeding further I must confess that Special Education is a new field for me; my specialization is in "Early Childhood Education."

The maxim "learning is a life long process" struck upon my mind (although now I feel to preach is easier than to practice) and I accepted the challenge and decided to train myself in Special Education. I drafted a research proposal — "A Study of the Programs of Some Selected Institutions for Handicapped and Under Priviledged Children in the United States and Their Relevance to India," (as I was in Europe for more than four years now I wanted to work in the USA).

How will my efforts be useful to my country? At this stage it is too early to draw my conclusion. There is a lot to learn before I return to my country, but I am quite optimistic about my work. Every cloud has a silver lining.

PLAN AHEAD FOR THE SUMMER INSTITUTE – 1983!

There were many applications for leadership and direct service training in this summer's Developmental Therapy Institute. With only six places available for leadership training and a similar number available for direct service training, selecting from among so many well qualified people was a hard task. We look forward to this exciting summer Institute with the 12 applicants who were selected.

If this summer's requests are any indication of future needs, it will be important to let us know well in advance if you are considering participating in next summer's Institute. We already have one application for our Developmental Art Therapy Training slot!

If you are not familiar with the Summer Institute: The Developmental Therapy Training Institute is a six-week period of study for those interested in obtaining advanced experience in Developmental Therapy. The Institute offers two training tracks. The leadership training is provided for individuals in supervisory or leadership positions. It focuses on developing competencies in supervising and training others to use Developmental Therapy. We recommend that persons participating in this training track have prior experience using Developmental Therapy with children. The direct service training is intended for persons whose primary responsibilities include classroom teaching. The training focuses on increasing a teacher's knowledge and skills. In this track trainees participate on a treatment team at Rutland Center to work with severely disturbed children and their families.

The University is on a quarter system, and the Institute accepts trainees for two quarters during the academic year — Summer and Winter. You can participate in the Institute on either a credit or non-credit basis. There are no expenses involved for non-credit participants. Credit participants pay the regular University fees, and the credit hours earned can be applied toward a degree program.

Those interested in applying to the Institute must send in the following: (1) a resume; (2) three letters of reference which reflect teaching ability, professional skills, and ability to relate to children; (3) transcripts of previous academic work; and (4) a letter stating how the training would be useful to you professionally. The letters of reference and the transcripts should be sent to the following address and are in addition to those required for admission to the University of Georgia.

March 1983 will be the final month that applications will be accepted for Summer, 1983. For more information contact:

Dr. M. Wood or C. Combs, Co-Directors
Developmental Therapy Institute
Division of Exceptional Children
Aderhold Hall
University of Georgia
Athens, GA 30602
(404) 542-1685

A "VISUAL BANK" FOR INCREASING CHILDRENS' SYMBOLIC EXPRESSIONS

by Geraldine H. Williams, ATR

(A) A discussion was begun on how a recent snowfall (This was during last winter!) had affected everyone. These simple forms gave a focus for each child to start his drawing.

Many a skilled elementary reading teacher knows the value of a "word bank" for increasing students' language and word recognition skills. By using a creative story telling situation or a current event topic (subject and style of presentation dependent on the developmental level of the students), a rich array of descriptive words can be obtained from the students themselves. When recorded on a chalk board or experience chart, a "word bank" provides a visual model for children to use in creative writing and story telling exercises in class.

Similarly, a "visual bank" can be created for students to provide an array of symbols for expressing themselves successfully in their art work.

A "visual bank" is built by taking the time when beginning an art therapy session to present a simple topic, motivate each child to offer ideas about the topic, and quickly make sketches of what ideas are expressed. Then leave the "visual bank" on display, provide art materials, and begin the therapy session. In this way each child has participated in the motivation for the lesson and all have a rich resource to draw from if needed.

Experience with this technique has shown that children's anxiety levels go down more quickly with the use of the "visual bank" as a "crutch" for those less skilled children. As their drawings take on successful representation, the children are more comfortable in entering a therapeutic dialogue, to share insights, and relate to others in their group. Another observation is that where many children will directly copy from the "visual bank" initially, once they enter into the "magic" of the art experience itself, they begin to embellish their drawings with original ideas and symbols. It is as if the success of the initial drawing provides the security for other attempts, less artistically skillful yet more richly experiential.

Using verbal models is another way to build a "visual bank." The therapist says a word — then draws a symbol to represent the word meaning. This seems to help even the most confused child and provides a model for words and actions for use during the art session. For children who express themselves well verbally, having help in quickly drawing successful symbols gives them additional range and freedom to talk and share ideas. Such children can verbally communicate their ideas but may have difficulty in expressing themselves through artistic representation. This is not as much of a problem with most Stage II children, as neither their own standards nor their peer relationships include notice of their own art as their primary expressive tool. Individually rewarding fantasy and makebelieve are more comfortable symbols at this stage. However, once children move into Stage III developmentally, they do become critical of their own work as well as others. Then it is important to help them symbolically represent their spoken ideas to a degree that will please themselves and others.

For children lost in a schizophrenic world, or who have confused thought processes, successful, reality-oriented expressions are rare. The "visual bank" often provides a first means of sharing their world with others. In contrast, artistically gifted children may not find the "visual bank" as useful as lesser skilled children do. It is helpful however, to provide them the critical dialogue time to motivate their artistic expression. Simple reflections and interpretations of their ideas can serve well to direct their therapy sessions along with the others.

Some art therapists reject the idea of providing visual representations for emotionally disturbed children. They believe it is this procedure that could "corrupt" the power of personal expression. However, we have found that our

(B) This drawing was done by a Stage II child and gave graphic proof of his use of the bank. However, the therapist was more rewarded by the ensuing verbal discourse the drawing helped release from the child.

children have difficulty using art materials to express themselves. They apparently receive adequate motivation from a "visual bank" to attempt an art activity. Dependence on a "visual bank" ends once their confidence in themselves and their art work is intact. The "bank" also fosters positive relationships between therapist and child, as a demonstration by an "expert" provides a secure model for them. Some children are willing to risk themselves for the first time to ask an adult for help in drawing something from the "bank" that they want to include in their pictures.

Whether you use art therapy sessions to focus on behavioral, communication, or social-emotional problems, therapy often can be most rewarding by using the "visual bank" in conjunction with other creative art forms such as a short story, a pre-drawn background design on each student's paper, a puppet, or a role playing incident. The overriding intent is to stimulate children's ideas so they will use art as an effective communication tool and so that they will find a successful, pleasurable experience with each art therapy session regardless of their art education level or their emotional problem.

CALL FOR PAPERS AND PROGRAMS

CEC's 61st Annual International Convention
April 3-8, 1983
Detroit, Michigan

The February, 1982 issue of *Exceptional Children* contains detailed information for responding to the CEC call for papers. Dr. Lyndal Bullock, Program Chairperson, urges professionals involved in noteworthy projects to disseminate information about their projects through presentations at this convention.

The deadline is June 15, 1982

Proposals (2 copies) should be sent directly to:
Dr. Lyndal Bullock
Program Chairperson
Department of Field Services
Council for Exceptional Children
1920 Association Drive
Reston, VA 22091

WE HOPE TO SEE ALL OF OUR DEVELOPMENTAL THERAPY COLLEAGUES THERE!

POSITION AVAILABLE

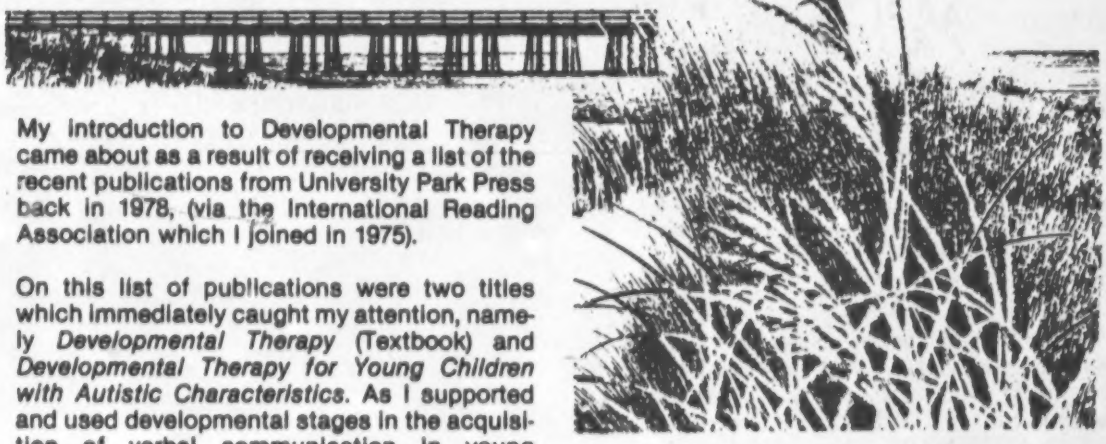
August 15, 1982

Teacher trained in behavior disorders field and Developmental Therapy needed to work as member of treatment team in a psychoeducational program located in Northwest Georgia.

Contact: Dr. George Andros
820 N. Hamilton Street
Dalton, GA 30720
(404) 272-2140

TRAINING IN DEVELOPMENTAL THERAPY TO TAKE BACK TO NEW ZEALAND

by Barbara Forsyth
Duneden, New Zealand



My introduction to Developmental Therapy came about as a result of receiving a list of the recent publications from University Park Press back in 1978, (via the International Reading Association which I joined in 1975).

On this list of publications were two titles which immediately caught my attention, namely *Developmental Therapy* (Textbook) and *Developmental Therapy for Young Children with Autistic Characteristics*. As I supported and used developmental stages in the acquisition of verbal communication in young children, I was naturally interested in both books which I subsequently ordered from University Park Press.

At that time I was working on a thesis on autism looking at various teaching/treatment approaches which had been used, and then including my own tentative findings on developing communication skills through the medium of music. As New Zealand is so far away from the United States, it took three months for the books to reach me, and by that time I had completed my thesis. However, as I continued to work with communication-impaired children, I found the material of interest.

In 1980 I was given the opportunity to apply for a scholarship for Teachers of the Handicapped, which was for one academic year of study at an institution of my choice. When I received the scholarship, I contacted Dr. Mary M. Wood to inquire about the availability of a course in Developmental Therapy at the University of Georgia.

I was excited to hear that classes were available every quarter, and that beginning in September 1981, with a year of study, I could possibly cover the requirements for a M.Ed. To date I have taken six classes in the education of children with emotional disturbances, and I am at present in my second quarter of practical training at the Rutland Center, learning the use of creative activities in Developmental Therapy with these children.

In New Zealand, multi-handicapped children who do not meet criteria for acceptance into State Schools for the Intellectually Handicapped (EMR and some TMR) are cared for by a voluntary society.

The NZAIH (known as the Intellectually Handicapped Children's Society) is the largest voluntary independent organization for the handicapped in New Zealand, and cares for approximately 6000 persons from infants to adults.

In 1966 the first pre-school (PSSC) run by the IHC was established in Dunedin, and it cares for up to 30 children, on a daily basis. The majority of children would be in the CA range of 3 to 10 years. The children attend the Center from 9 AM to 2 PM and are transported by minibuses. A mid-day dinner is provided at the Center in order to teach self-care skills of feeding, toileting, etc. and to reduce pressure on families.

As in the Rutland Center, the PSSC cares for a child's normal development while providing environmental experiences and special help/training for those aspects of his development which are delayed.

It is in this Center that I hope to motivate the application of the Developmental Therapy model when my study ends this June. There is much learning to take back to New Zealand!

Reprinted from "THE GOOD NEWS"

A Publication of Programs for the Emotionally Handicapped
Richland County School District One
1225 Oak Street, Columbia, South Carolina
through the auspices of Joby Robinson

ACTIVITY: GROUP GAME

DTORF OBJECTIVE: S-18 to participate in cooperative activities

MATERIALS NEEDED: Two sets of letters of the alphabet; word cards to be spelled and points for each word; a watch with a second hand.

EXAMPLES OF WORDS AND POINTS THAT CAN BE USED IN THIS ACTIVITY:
tree (5 pts.) star (5 pts.) mistletoe (10 pts.) holly (5 pts.) Noel (5 pts.) Santa Claus (10 pts.)

DESCRIPTION:
1. Divide two sets of letters with each group.
2. Give each group alphabet letters and have each group spread letters out on a table.
3. Designate a person to be the timer and word caller.
4. This person calls out one word and tells points for the word. Each group has to find the letters in the word and have group members stand in the correct order holding up letters so that the word is spelled correctly.

CAUTIONS:
1. Remember to make duplicate alphabet letters for any word which has repeated letters (i.e., *tree*; each group would need two *ee*'s).
2. Although the game involves group effort, it also involves group competition. You may want to "talk through" the game to let them know there will be a group winner since there are points given. If your group cannot handle *competition*, do not attach points to the words.
3. Make sure each group is equally divided so that one group is not composed of best spellers. In our group, one student was far below others in spelling, so he was given the responsibility of Timer and Scorekeeper.
4. Since this game is exciting and involves physical activity, you may want to have a more sedentary activity to follow in order to calm students down.

Contributed by Tommie Wicker,
School Psychologist

A SUMMER TRAINING OPPORTUNITY

Music in Developmental Therapy

This summer the Savannah College of Art and Design in Savannah, Georgia will offer a course on the use of music in the Developmental Therapy Model. An emphasis will be placed on music materials, activities and techniques which are used to foster the social-emotional growth of children functioning at various stages of development. A background in music is *not* required for enrollment in the course.

The dates for the course are June 7-11 (Mon.-Fri., 9 AM-4 PM). The enrollment fee is $100 and participants may register for 3 quarter hours of credit. The instructors for the course, Jennie Purvis and Bonnie Grifa, are both registered music therapists who have had extensive training and experience in the Developmental Therapy Model.

For application forms and/or more information contact: Music Therapy Associates — 3025 Bull St. — Savannah, GA 31405 (912) 234-3825 or (912) 786-5773.